

# SAFETY & WELFARE PLAN

CALIFORNIA DEPARTMENT OF CORRECTIONS & REHABILITATION  
DIVISION OF JUVENILE JUSTICE

REFORMING CALIFORNIA'S JUVENILE  
CORRECTIONS SYSTEM

*Farrell v. Hickman*

Safety & Welfare Remedial Plan

November 30, 2005

## EXECUTIVE SUMMARY

In November 2004, the State of California entered into a consent decree in the *Farrell v. Hickman* (then known as *Farrell v. Allen*) lawsuit. According to the terms of the consent decree, the State agreed to provide the court with remedial plans in the following six areas by January 31, 2005: education, medical care, mental health, disabilities, sexual behavior treatment, and general corrections.

Since the filing of the consent decree in November 2004, the State and plaintiffs agreed that effective reform of California's juvenile corrections system would require a more comprehensive plan. As a result, the state was given until November, 2005 to develop a Safety & Welfare Plan (which replaces the original "general corrections" plan), the final of six remedial plans in the *Farrell v. Hickman* lawsuit.

### **Highlights of the Safety & Welfare Plan**

- The concept of "general population" will be eliminated. Every youthful offender committed to the Division of Juvenile Justice (DJJ) will be provided rehabilitative treatment in order to reduce his/her risk to re-offend.
- Living unit size in *existing* facilities will be reduced to no more than 36 on single room units, 38 on open dorm units, and 24 on Behavior Treatment Programs. (New facility design/construction could reduce size further, consistent with national standards.)
- DJJ will consult with nationally recognized experts to assist in design, development and implementation of additional rehabilitation/treatment interventions, specifically in the areas of violence reduction, gang integration, substance abuse/dependence, normative culture and interventions designed specifically to meet the needs of female offenders.
- Potential service providers will be identified to implement appropriate rehabilitation/treatment programs for female offenders, including secure placements outside of DJJ's facilities, if appropriate.
- Dedicated positions will be established for developing and monitoring individual case plans for all youth in DJJ.
- Staffing coverage for custody/behavior management functions will be enhanced to ensure a safe environment that promotes a "normative culture" with restorative justice principles.
- Rehabilitation/treatment interventions will be developed and implemented initially, by outside subject matter experts. In the long term, DJJ will explore developing in-house staffing classifications to provide these interventions.
- Re-entry planning will be incorporated into individual case plans from the time a youthful offender arrives in DJJ custody.
- Dedicated positions will be established to address the needs of victims and to ensure that victim impact awareness is included in youthful offender programming.
- Staff training will be required, implemented, and monitored.
- Outcome measures will be consistently recorded, tracked, and reported.
- Realistic implementation of these wide ranging reforms will require phasing in over several years and will necessitate addressing facility as well as programmatic needs.

## **Principles & Timeframes for Implementation**

Recognizing the complexity and significance of the reform efforts required by the State, both parties agreed at the Case Management Conference in June 2005 that the plans filed in November 2005, in particular the Safety and Welfare Plan, would outline a phased-in implementation approach.

The principles for reforming California's Division of Juvenile Justice are described in detail in the next section. These principles include:

- 1) Safe and secure facilities;
- 7) Effective rehabilitative treatment to reduce recidivism;
- 8) Youth prepared for re-entry to the community and provided opportunities to address personal, social, physical, educational, and vocational needs;
- 9) Victims adequately heard, served, and protected by the juvenile justice system;
- 10) A strengthened juvenile justice continuum, through collaboration with stakeholders, communities, and families; and
- 11) Evaluation of program quality, outcomes, and effectiveness.

It is important to note that these principles mirror the goals outlined in CDCR's Strategic Plan adopted through the Department's 2004/05 reorganization effort.

The outline below identifies some of the ways in which the attached plan addresses each of these principles. Implementation will be accomplished by phasing these strategies into specific units. Outcomes will be measured to determine effectiveness during the phased implementation.

### ***I. Provide Safe, Secure Facilities.***

- Establish criteria to identify violently disruptive youth for placement in intensive rehabilitation/treatment programs.
- Identify current use of facilities and determine short and long-term strategies for each.
- Develop plan for new living unit and facility design.
- Continue reducing living unit size in existing facilities to no more than 38 for open dorm units, 36 for single room units and 24 for Behavior Treatment Programs.
- Enhance staffing on living units.
- Establish conflict resolution teams to support other staff with proactive behavior management, de-escalation of potential incidents, mediation, and conflict resolution.
- Hire consultants to assist with violence reduction and gang integration/intervention strategies.
- Phase out current Special Management Programs and replace them with rehabilitation/treatment oriented Behavior Treatment Programs.
- Implement transition plans for youth stepping down from Behavior Treatment Programs to core rehabilitation/treatment programs.
- Implement training for staff on gang intervention, conflict resolution, motivational interviewing, verbal de-escalation, mediation, and group facilitation.

- Identify community based organizations and volunteer organizations to provide gang intervention and other services, as needed, at each facility.
- Implement Strategies for Juvenile Supervision/Client Management Classification to assist in reducing violence and providing staff with proactive behavior management tools.
- Implement program model in modified/newly constructed living units and/or facilities.

## ***II. Provide effective rehabilitative treatment to reduce recidivism.***

- Develop an environment in which treatment is supported.
- Establish case managers and dedicated treatment staff for each phased in unit.
- Increase the minimum amount of formal rehabilitation/treatment from four hours per month to at least forty hours per month in phased in units.
- Assess risk to re-offend and develop Individual Change and Accountability Plans (based on this assessment) that will build on strengths and reduce risk.
- Develop and implement a core program model in which intervention approaches are matched to individual risks and needs.
- Develop and implement violence reduction strategies/programs for young adults.
- Provide staff skills training in Motivational Interviewing and Motivational Enhancement techniques.
- Enhance existing interactive journal programs and develop intensive needs curriculum addressing victim empathy, coping with trauma, criminal thinking and behaviors, and related topics.
- Develop and implement gender-specific programs for females.
- Identify potential providers for services for female offenders.
- Develop and implement a re-entry planning process that begins at commitment, follows a youthful offender through the system, and incorporates victim input, family involvement, community, and local law enforcement networks to ensure realistic plans upon release from an institution.
- Develop and implement short-term programs/strategies that specifically address the individual risks, needs, and behaviors of parole violators.

## ***III. Prepare youthful offenders for re-entry to the community by providing opportunities to address personal, social, physical, educational, and vocational needs.***

- Develop and implement “normative culture” processes and practices.
- Create individualized case plans for each youth, that are goal focused and build on strengths.
- Develop physical, academic, vocational, personal and social competencies and skills in individual, institutional, family and community contexts.
- Create incentives and opportunities for family involvement in the youthful offender’s rehabilitation/treatment.
- Ensure youthful offenders’ rights are protected (grievance procedures, discipline system, access to courts, access to religious services, etc.)
- Incorporate positive incentives into living unit/facility environment.
- Implement vocational assessments to identify employment interest and aptitudes as well as vocational training needs.

- Incorporate educational, vocational and developmental needs in each offender's Individual Change and Accountability Plan.
- Increase access to vocational programs for high school graduates.
- Establish Re-entry Specialists to serve as liaisons to community parole offices and other agencies, systems and organizations to ensure that youthful offenders and their families are linked to needed services in the community.
- Establish re-entry and parole violator units at each facility to assist in building life skills where youth may earn opportunities for outside clearance.

***IV. Strengthen the entire juvenile justice continuum through collaboration with stakeholders, communities and families.***

- Establish Community Court Liaisons to work with counties to improve initial assessment, individual case planning, family involvement, and collaboration with community, court, probation, and law enforcement partners.
- Establish statewide partnerships to develop common risk/needs assessment definitions as a basis for ensuring that offenders are appropriately placed throughout the continuum.
- Establish regional Re-entry Advisory Committees to include family representatives, crime victims, local law enforcement, probation, and Division of Juvenile Justices' representatives from institutions, education, and parole.

***V. Guarantee that victims are adequately heard, served, and protected by the juvenile justice system.***

- Incorporate restorative justice principles within and throughout all programming.
- Develop intervention strategies that provide opportunities for youthful offenders to increase their understanding of the harm they have caused to victims, their families, and the community.
- Increase opportunities for victims to provide information and input to staff, so victim issues can be addressed in offenders' Individual Change and Accountability Plans.
- Establish Victim Services and Restitution Specialists to ensure timely notification to victims, provide sensitive and responsive services to victims, and ensure victim inclusion in parole hearings and offender programming, as appropriate.
- Include victim impact and restitution information in the Orientation Program.

***VI. Continuously evaluate program quality, outcomes, and effectiveness.***

- Establish clear outcome measures to assess program and process effectiveness.
- Establish needed data collection systems and improve data management.
- Implement nationally recognized Performance Based Standards (PbS).
- Develop evaluation designs for specialized services and core programs.
- Implement comprehensive Quality Assurance programs to monitor and improve program implementation.
- Provide on-going training, performance support, monitoring, and quality assurance.
- Utilize evaluation/outcome data to determine necessary program and process modifications.

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## INTRODUCTION

### **Background for the Safety and Welfare Remedial Plan**

In November 2004, the State of California entered into a consent decree in the *Farrell v. Hickman* (then known as *Farrell v. Allen*) lawsuit. According to the terms of the consent decree, the State agreed to provide the court with remedial plans in the following six areas by January 31, 2005: education, medical care, mental health, disabilities, sexual behavior treatment, and general corrections.

In December 2004, leaders from the California Department of Corrections and Rehabilitation (CDCR) and its Division of Juvenile Justice (DJJ), then known as the Youth and Adult Correctional Agency and the California Youth Authority,<sup>2</sup> began to visit other states' juvenile justice systems, including those in Missouri, Florida, Texas, Washington, and Colorado. These states were selected either because they were reported to have model juvenile corrections programs and/or because they were somewhat comparable to California in size and/or scope of challenges<sup>3</sup>. The focus of these tours was on juvenile corrections programs for serious and violent offenders and/or youthful offenders with serious mental health issues.

The information gathered from these trips as well as available research on best practices and evidence-based principles, in addition to input from California's juvenile justice and law enforcement stakeholders, convinced State leaders that effective reform of California's juvenile corrections system would require a broader approach than was originally intended for the remedial plans.

As a result, the State and the plaintiffs jointly filed a Stipulated Agreement on January 31, 2005 stating:

“Since the entry of the Consent Decree in this case, the CYA has implemented interim measures to address deficiencies identified in the expert reports and has drafted proposed Remedial Plans in consultation with the experts, plaintiff's counsel, and the Special Master. The CYA has also undertaken a review of practices in other systems. As a result, the CYA has committed to reforming California's juvenile system to a rehabilitative model based on a therapeutic environment. The parties agree that the Remedial Plans are dependent on the new system and therefore cannot be submitted in accordance with the schedule set forth in the Consent Decree.”

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<sup>2</sup> Effective July 1, 2005, the Youth and Adult Correctional Agency was reorganized and became the California Department of Corrections and Rehabilitation, pursuant to Statutes 2005, c. 10, SB 737. As a result of this reorganization the entity previously known as the California Youth Authority is now the Division of Juvenile Justice.

<sup>3</sup> It should be noted, however, that none is truly comparable to California. California's system is different from each of these states' in a number of ways, including: offenders in California's juvenile system can remain under the state's jurisdiction until their 25<sup>th</sup> birthday; this extended jurisdiction results in lengths of stay in California's juvenile system that are much longer than most other states', and California's gang-entrenched population poses challenges not found elsewhere.



The January Agreement went on to outline a schedule for the remedial plans that was staggered over the next 10 months (Interim Medical Care 2/05, Education 3/05, Interim Mental Health 4/05, Disabilities 5/05, Sex Behavior 5/05, and Safety and Welfare 11/05). In the meantime, the State agreed to file a programmatic description of the new therapeutic model (5/05).

Note: Since the original consent decree was filed, it has been agreed to refer to the General Corrections remedial plan as a Safety and Welfare plan and to incorporate the rehabilitative model into this plan. Therefore, the Mental Health plan (final plan due 11/05) pertains primarily to addressing the serious mental health needs of youthful offenders and the Safety and Welfare plan (described herein) pertains to the core program model that will be required for every youthful offender committed to the State's jurisdiction.

### **General Description of the Deficiencies Addressed**

In addition to addressing the principles outlined in the January 31, 2005 Stipulated Agreement and the programmatic description filed on May 16, 2005, the Safety and Welfare Plan addresses some of the most fundamental deficiencies identified in the original General Corrections and Mental Health expert reports (many of the issues regarding rehabilitative treatment were originally included in this latter expert report). In general terms, these deficiencies include:

- High levels of violence among youthful offenders and against staff in the state's facilities;
- Lack of a classification tool to identify and separate higher risk (for institutional violence) offenders from lower risk offenders;
- Lack of a distinction among facilities in terms of security classifications;
- Overall lack of rehabilitative programming for offenders in the general population units (direct dedicated treatment services are provided to only 37% of the current population);
- Disconnect between the current treatment needs assessment and individual treatment plans;
- Inability of existing staff to provide effective therapeutic interventions, due to, among other factors, a lack of adequate training, time, and resources;
- Excessive use of force;
- Specific violations of youthful offenders' rights to grievance procedures, access to courts and religious services; and
- A significant need for monitoring, compliance, and quality assurance.

The changes outlined by this Safety and Welfare Plan address the deficiencies described above. More importantly, these changes lay the foundation for continued improvement to California's juvenile justice system.

### **Integrating the Safety and Welfare Plan with the Other *Farrell* Remedial Plans**

One of the challenges posed by this lawsuit, in particular by the deadlines laid out in the January 31, 2005 Stipulated Order, is that six different remedial plans were developed at different times. The earlier plans, e.g., Education and Sex Behavior Treatment, were submitted in court before the Safety and Welfare plan, the most overarching of the six plans, was drafted. To incorporate

the work done on those earlier submitted plans, DJJ has attempted, wherever possible, to make the Safety and Welfare plan consistent with the other plans. In instances, where this was not possible or desirable, DJJ will be required to modify its existing plans to address inconsistencies. DJJ will present these modifications to plaintiffs counsel and the court experts for review as necessary.

### **Vision for New Approach**

The first section of the Safety and Welfare Plan describes the principles of the Division of Juvenile Justice, as it moves toward the type of reformed juvenile justice system envisioned by the January 2005 Stipulated Agreement. These principles, as noted previously, include safe and secure facilities; effective rehabilitative treatment to reduce recidivism; re-entry preparation; collaboration with stakeholders, communities, and families; incorporation of victim input and impact; and ongoing evaluation. These six principles were used as the foundation for developing the rest of the plan. The Safety and Welfare Plan seeks to further refine DJJ's goals, in the context of these principles, while addressing the deficiencies identified in the *Farrell* lawsuit.

As indicated by the principles above, DJJ is committed to moving toward a system, in which interventions and rehabilitation/treatment approaches are based on best practices, "what works" and evidence-based methods that have demonstrated desired outcomes with similar populations. Toward this end, staff will be provided the training and/or skill development necessary to engage youthful offenders who are resistant to programming.

Traditionally, offenders who did not "want to program" were either disciplined or left alone to "do their time." Research around motivational interviewing and other evidence-based practices suggests that just the opposite should occur. In order to reduce recidivism, treatment should be targeted very specifically at offenders who are most likely to re-offend. Rehabilitation/treatment approaches should be modified when they are failing to appropriately engage the offenders. Training staff to use motivational approaches throughout the system will be key to the success of the new programming model.

The cultural shift required to implement the changes outlined in this Plan are significant indeed and will require thoughtful implementation. As opposed to simply mandating changes through policy or regulation, DJJ is committed to transforming the culture of its institutions and system. As we move toward applying a strength-based model with youthful offenders, we must simultaneously develop strategies for organizational change. First we must, acknowledge and respond to the different values and beliefs that currently exist with staff and offenders and then we must ensure that adequate training, support, coaching and recognition of positive efforts and outcomes are built in to ongoing agency practices.

### **Which Population is This Plan Designed to Address?**

As required by the court, DJJ has developed a Safety and Welfare Plan that addresses not only the deficiencies from the original expert reports as required by the Consent Decree, but one that

also describes a state juvenile system that is committed to a rehabilitative model, as required by the January 31, 2005 Stipulated Order.

This Plan promises an improved system for every youthful offender committed to DJJ. The Consent Decree required the State to “develop formal criteria for accepting wards” into [DJJ]; prohibited the State from accepting “more wards than can be materially benefited by [DJJ’s] reformatory and educational discipline;” and prohibited the State from accepting wards “for whom [DJJ] does not have adequate facilities.” It is the State’s belief that youthful offenders committed to DJJ would materially benefit from the changes outlined in this and the other five remedial plans.

### **Understanding the Needs and Challenges of DJJ’s Population**

In order to understand the remedial plans that follow, it is important to know the population served by DJJ. Within the context of the entire juvenile justice system in California, only a very small percentage of youth are committed to DJJ each year. Of those youth referred to local probation departments, the vast majority are supervised and/or provided services and sanctions at the county level, i.e., diversion, supervision by probation officers, treatment services, community-based or residential interventions, and/or commitment to a local juvenile detention facility, camp or ranch. Less than one percent are committed to the State’s juvenile corrections facilities each year. For example, in 2003, 1,009 youth were committed to DJJ (CYA at the time) out of 176,810 juvenile referrals to probation. This number represents 1.1% of the juvenile court dispositions. Commitments to DJJ represented 1.1% of the juvenile court dispositions (87,927) in 2003 or 1.7% of the youth (59,405) adjudicated with formal wardship.<sup>4</sup> In 2004, the percentage remained essentially the same at 1.2%.

As of November 2005, there were a total of 3,016 youthful offenders committed to DJJ’s institutions and camps. This number is below the 3,566 that were in the institutions and camps last November, but not as low as the original projections (2,925) had predicted last spring. An additional 3,276 youthful offenders are under DJJ’s jurisdiction on parole.

DJJ has committed in this Safety and Welfare remedial plan to work with state and local partners to clarify its rejection process to ensure that only those youth who will materially benefit from a commitment to DJJ are accepted (Welfare & Institutions Code §736). DJJ does not anticipate a significant change in the population based on this clarification. This policy clarification is intended specifically to address the few youth who, because of their severe physical or mental health needs and problems, would not be able to materially benefit from the type of rehabilitative/treatment program outlined in the Safety and Welfare or other remedial plans.

Of DJJ’s total institution and camp population (current camp population represents only 4% of youth), approximately five percent (5%) are female. In terms of racial/ethnic breakdown: 50% of the youth are Hispanic, 30% are African American, 14% are White, and 6% are identified as “Other.” Twenty-seven percent (27%) are age 17 or under. Forty-four percent (44%) are ages 18-19, and 29% are age 20 or older. Thus, almost 75% of the population are age 18 and older. (Youthful offenders must be discharged from commitment upon their 21<sup>st</sup> or 25<sup>th</sup> birthdays,

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<sup>4</sup> *Juvenile Justice in California 2003*, California Department of Justice, Criminal Justice Statistics Center, 2003.

depending on the offense. Approximately 65% of the youth currently committed to DJJ, were committed with an extended age of jurisdiction through age 24.) It should also be noted that 96% of these offenders were committed by a juvenile court, with only 4% committed by an adult criminal court. A little over 80% of the current institution and camp population is at DJJ on a first admission. Less than 20% are at DJJ for a parole violation or recommitment.

More commitments (23%) come from Los Angeles County than from any other county. The next highest number of commitments (at 7% each) come from Fresno and San Bernardino Counties.

A recent analysis of the current population by risk (for institutional violence) and specialized treatment need identified the following breakdown by gender, age, and region. Note: This analysis is for informational purposes. Final groupings of risk, need, etc., will be determined once the new assessment is in place and will include risk to-re-offend and other variables, as determined in consultation with experts.

<b>Males Committed to DJJ (as of 11/05)</b>	<b>Northern California</b>		<b>Southern California</b>		<b>Central California</b>	
<b>Treatment Need</b>	<b>Males Under 18</b>	<b>Males 18 &amp; Over</b>	<b>Males Under 18</b>	<b>Males 18 &amp; Over</b>	<b>Males Under 18</b>	<b>Males 18 &amp; Over</b>
Low Risk Core Treatment (inc. sub abuse)	0.6%	2.5%	0.7%	3.4%	1.5%	5.7%
Moderate Risk Core Treatment (inc. sub abuse)	2.4%	5.2%	5.1%	6.1%	6.9%	11.7%
High Risk Core Treatment (inc. sub abuse)	1.2%	1.1%	1.6%	1.1%	2.4%	3.0%
Specialized Mental Health Treatment Needs	0.8%	1.5%	0.9%	1.4%	1.7%	2.9%
Mandated Sex Behavior Treatment	0.6%	3.2%	1.2%	2.1%	0.5%	2.9%
Parole Violators	0.1%	4.3%	0.1%	5.0%	0.3%	8.3%
Total (of total male population)	5.6%	17.7%	9.7%	19.1%	13.4%	34.6%
	23%		29%		48%	

<b>Females Committed to DJJ (as of 11/05)</b>	<b>Northern California</b>		<b>Southern California</b>		<b>Central California</b>	
<b>Treatment Need</b>	<b>Females Under 18</b>	<b>Females 18 &amp; Over</b>	<b>Females Under 18</b>	<b>Females 18 &amp; Over</b>	<b>Females Under 18</b>	<b>Females 18 &amp; Over</b>
Low Risk Core Treatment (inc. sub abuse)	0.0%	1.3%	0.7%	1.3%	0.7%	3.3%
Moderate Risk Core Treatment (inc. sub abuse)	4.6%	7.9%	4.0%	4.6%	4.0%	8.6%
High Risk Core Treatment (inc. sub abuse)	2.0%	0.7%	2.6%	0.7%	4.0%	3.3%
Specialized Mental Health Treatment Needs	4.0%	2.6%	3.3%	4.0%	4.0%	6.0%
Mandated Sex Behavior Treatment	0.0%	0.0%	0.7%	0.0%	0.0%	0.7%
Parole Violators	0.0%	5.3%	2.0%	5.3%	0.7%	7.3%
Total (of total female population)	10.6%	17.9%	13.2%	15.9%	13.2%	29.1%
	28%		29%		42%	

It is important to note that in the above chart, low risk refers to low risk for institutional violence, not risk to re-offend or risk to public safety. The table above provides a preliminary sense of the range of treatment needs and risk levels based on today's population. DJJ will conduct a comprehensive risk/needs assessment of every youth, as outlined in this plan, to better identify the rehabilitative/treatment needs of youth in addition to the specialized (mental health and sexual behavior) treatment needs identified in the table above.

As confirmed by the September 1, 2005 Status Report to the Legislature, DJJ believes that the state's facilities should be used for only the higher risk/higher need youthful offenders in the statewide juvenile justice continuum. To this end, DJJ will be working with the counties on a statewide definition of risk, which should include measures of risk to re-offend and dangerousness. Though a youth may be assessed as high risk at the county level, once committed to DJJ, youthful offenders will be reassessed and classified as high, medium/moderate or low risk based on objective criteria. The initial and regular reassessments will be normed for the DJJ population. In the remainder of this report, the term "low risk" is relative to the DJJ population.

In terms of commitment offense, approximately 75% of the youthful offenders currently in DJJ's institutions and camps were committed for a violent offense, a sex offense, or a weapons offense; 19% for a property offense, 3% for a drug offense, and 2% for "other" offenses, which include miscellaneous felonies, malicious mischief, accessory to felonies, and DUI or reckless driving with injury.

Once committed to DJJ, youthful offenders are assigned a Board Hearing Category. The determination of board category is made by intake staff based on specific guidelines in state regulations. Category assignments are then reviewed by the Board. An analysis of the current institution and camp population shows that approximately 60% of youth fall into categories 1-4, the most serious levels, with approximately 40% coming under board categories 5-7 or the less serious categories. It is important to note that many types of offenses, even violent and weapons-related offenses, may fall under different categories depending on the specific charges and the degree of injury to the victim. For example, Assault and Battery can be category 2 down to category 7, depending on whether weapons were used and the extent of physical harm to the victim. A more detailed recent analysis of the board categories found that approximately 60% of wards in Category 6 and 40% of wards in Category 7 had been committed for a violent crime or weapons-related offense.

During the last fiscal year, the average length of stay at DJJ for all releases to parole was 24 months and the average length of stay for all first admissions (not including parole violators or recommitments) released to parole or discharged was 35 months.

A recent analysis of recidivism among DJJ commitments revealed that approximately 70% of youthful offenders released from DJJ institutions in the year 2000 were subsequently arrested for a non-traffic offense within 36 months of their release. That figure follows a gradual decline in this percentage since 1988, when closer to 80% of releases were re-arrested within three years. Comparable figures for youthful offenders released in the 1960s and 1970s, in 1981-82, and in 1985-86 were even higher, reaching 85% to 90%. Over that same period, the California juvenile crime rate rose sharply, peaked in 1993 and then declined even more dramatically.

### **Population Projections**

Based solely on recent trends, the latest (Fall 2005) population projections suggest that DJJ's population will continue to decrease over the next ten years, dropping to 2,255 by 2015.

Anecdotally, the decrease in commitments stems from many factors, including a growing frustration on the part of judges and probation departments with DJJ's current program quality. It is very possible, then, that commitments to DJJ will begin to increase as county probation departments and juvenile court judges begin to see an improvement in the quality of DJJ's programs.

### **Implementation Process**

Given the broad scope of reform outlined in this Safety and Welfare plan, DJJ intends to phase-in implementation of these changes over the next several years. There are several important reasons for phased implementation. First, in order for the changes outlined in this plan to succeed, they must be implemented completely, coherently, and with integrity. Program, facility, staff, training, funding and service delivery issues must be coordinated throughout each step of the implementation. In this regard, there are a series of internal and external processes required for implementation over which DJJ does not have complete control, e.g., establishing new staff classifications, recruitment, hiring, entering into contracts, and labor negotiations that require the participation and coordination of other public or private entities. Second, phased in implementation will enable DJJ to evaluate the processes and outcomes of these reforms as they are put in place to assure they are working as anticipated. Additionally, research and the experience of other states that have engaged in comprehensive reforms of this kind indicate that a phased-in approach helps stakeholders, both internal and external, see and value the impact of the changes, thus making the entire plan more likely to be successful.

DJJ has described the Safety and Welfare Plan in four timeframes: Immediate, Phase I, Phase II, and Long Term. Immediate changes are those that DJJ will begin implementing within the current fiscal year (FY 05/06). Phase I will begin with the passage of the Fiscal Year 06/07 budget, as it requires additional resources. (Note: To the extent possible, DJJ will begin preparing for Phase I implementation immediately so that this process can be expedited as much as possible.) Phase II implementation will begin with the passage of the Fiscal Year 07/08 budget. Finally, those items listed as Long Term require either implementation of earlier parts, i.e., the risk/needs assessment; statewide collaboration, i.e., statewide agreement around definitions of risk/needs; or facility modifications. DJJ will begin working towards all of these changes immediately and anticipates some of them will be implemented by Fiscal Year 07/08. However, for many of these longer term changes, there are so many external factors, such as legislative approval and agreement among 58 counties, to name a few, that DJJ cannot in good faith realistically commit to earlier implementation.

### **Phase I Implementation**

DJJ will target 20 living units for Phase I implementation of the Safety and Welfare Plan, representing approximately 25% of DJJ's total living units. These units will be the first to receive the enhanced staffing necessary to meet the requirements laid out in this plan. They will also be among the first to receive the additional training and other resources identified. (Note: DJJ does not plan to restrict training to staff in Phase I units, only to prioritize training to begin on these units first.) Much of the Phase I implementation will be established on living units that are currently closed, thereby reducing the population size of other units at the given facility. In so far as these changes are being implemented in response to a lawsuit, DJJ felt it was more

appropriate to implement changes across the state in various facilities with each of its different populations, instead of “piloting” these changes at a single facility. As a result, DJJ has selected living units across the state, including both open dorm, single room, and over- and-under 18 units for Phase I, enabling us to model the changes in a variety of settings.

In addition to changes on the first 20 living units, Phase I implementation will also include other facility and statewide changes which will begin to impact the entire population. For example, changes to the disciplinary and grievance systems will be implemented statewide.

While DJJ is committed to monitoring and evaluating the implementation of each phase and fully expects to modify future implementation strategies based on what is learned from earlier phases, it is important to understand that Phase I will not be a pure case for testing the changes outlined in this plan. First, Phase I will be implemented in stages and therefore not fully intact until close to the end of the year. Second, there are certain elements of the overall reform that will not be in place until Phase II begins, e.g., the ability to develop individual case plans from the risk/needs assessment, the provision of specific rehabilitation/treatment interventions that will be developed during Phase I, etc. Third, there are certain elements that will be implemented across the state from the beginning, not restricted to Phase I units only, thereby making it impossible to contain changes to only the Phase I units. Examples include, conflict resolution training will be provided to all staff and dedicated conflict resolution teams will be established at most facilities to provide modeling for staff and additional support for the education areas and living units.

In selecting Phase I components, DJJ has prioritized implementing those elements of this plan that will lay the foundation for the model and will provide improved safety for both youthful offenders and staff. For example, the Behavior Treatment Programs will be among the first components implemented. Other elements include: (1) reducing the size of existing living units (as indicated above, where possible, DJJ is re-opening closed units to reduce the population size on surrounding units), (2) addressing other pressures at existing facilities, i.e., converting N.A. Chaderjian to a specialized treatment facility and/or removing higher risk/higher need populations from open-dorm settings, and (3) ensuring that a variety of units and populations will be modeled in Phase I.

### Phase II Implementation

DJJ will target an additional 20 living units in Fiscal Year 07/08 for Phase II. Again, where possible, Phase II will be established on units that are currently closed, further reducing population size on surrounding units.

Phase II units will incorporate components of some of the longer-term goals of the plan. For example, Phase II will include creation of specific Re-entry Units, designed as step-down units within the facility, to better prepare youthful offenders prior to returning to their communities. Phase II will also incorporate additional elements of the Core Rehabilitation/Treatment Program on living units, as developed by the consultants during Phase I. Phase II will further include the development of units for parole violators, addressing the specific rehabilitation/treatment needs of this shorter-term population.



In addition, by Phase II, the risk/needs, mental health, and sexual offender assessment instruments will have been selected and put into use. Therefore, during Phase II, the objective criteria for unit placement and related programming can be implemented, utilizing the results of all assessments, as appropriate.

Long Term:

Long Term implementation includes Phase III (FY 08/09) and Phase IV (FY 09/10) of living unit implementation. By the end of Phase IV, all living units in existing facilities will be established in or converted to the new model.

Depending on legislative authorization and funding, new juvenile facilities may become operational during Phases III and IV. As these facilities/living units become available, DJJ will implement the new model in them, making it possible to further reduce living unit size and at the same time possibly begin to close existing facilities. On December 1, 2005 DJJ will submit a preliminary Facilities Master Plan to the Legislature outlining the need for new facilities, based on the incompatibility of existing facilities with the program model outlined in this and the other *Farrell* remedial plans. In subsequent reports to the Legislature over the next six months, DJJ will present more detailed plans for new construction, renovation, and the continued use of existing facilities.

Additional elements of Long Term implementation include: establishing statewide definitions with the 58 counties of risk/needs criteria; increased partnerships with private and public service entities to provide services both within and outside of DJJ facilities; and facility renovation and construction, as needed.

IMMEDIATE (CURRENT FISCAL YEAR)	PHASE I (FISCAL YEAR 06/07)	PHASE II (FISCAL YEAR 07/08)	LONG TERM (FISCAL YEAR 08/09 & BEYOND)
Hire Consultants <ul style="list-style-type: none"> <li>▪ Classification/Assessment</li> <li>▪ Normative Culture</li> <li>▪ Substance Disorders</li> <li>▪ Violence Reduction</li> <li>▪ Aggression Replacement</li> <li>▪ Conflict Resolution</li> <li>▪ Gang Integration</li> <li>▪ Female Offenders</li> <li>▪ Re-Entry</li> </ul>	Target 20 living units <ul style="list-style-type: none"> <li>▪ Behavior Treatment Programs</li> <li>▪ Core Rehabilitation/Treatment Units</li> </ul>	Target 20 additional living units <ul style="list-style-type: none"> <li>▪ Re-Entry Units</li> <li>▪ Substance Dependence Units</li> <li>▪ Violence Reduction Units</li> <li>▪ Parole Violator Units</li> <li>▪ Sexual Behavior Units</li> </ul>	Implement model on remaining units and in modified/newly constructed living units/facilities.
RFP for risk/needs assessment instruments	Implement risk/needs assessment	Implement programs developed by consultants.	

Identify potential providers for female offenders	RFP for services/programs for female offenders, including outside of DJJ's facilities if appropriate.		
Begin converting N.A. Chaderjian to a specialized treatment facility.			

### **Process to Update/Review/Modify Plan**

Given the significance of the changes proposed by and required to implement this plan -- changes that have taken years to be developed in other states -- there are certain elements of the plan that are dependent on the ongoing input and participation of external subject matter experts. DJJ proposes to continue refining the details of this plan throughout implementation, but particularly during Phases I and II. DJJ will assemble a team of experts to provide technical assistance with program development and implementation, particularly in the areas of classification/assessment, violence reduction, treatment for substance abuse/dependence, treatment/programs for female offenders, gang integration, re-entry and cultural change. (Note: This list does not preclude DJJ from identifying other areas that require additional technical expertise or subject matter experts.)

If the advice of subject matter experts and/or findings of DJJ's ongoing evaluations of the phased changes warrant modifications, DJJ will submit modifications and updates to the Safety and Welfare Plan as necessary.

## **I. Principles for the Division of Juvenile Justice**

## **PRINCIPLES**

### **CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION DIVISION OF JUVENILE JUSTICE**

#### **STATEMENT OF PRINCIPLES**

As defined by law, the State is required:

*“To protect society from the consequences of criminal activity and to that purpose community restoration, victim restoration, and offender training and treatment shall be substituted for retributive punishment and shall be directed toward the rehabilitation of young persons who have committed public offenses.”*

-Welfare & Institutions Code Section 1700

#### **PRINCIPLES:**

California’s state juvenile corrections system will ensure protection and safety for victims, communities, staff, and youthful offenders by:

- 1. Safe, secure facilities;**
- 2. Effective rehabilitative treatment to reduce recidivism;**
- 3. Youth prepared for re-entry to the community and provided opportunities to address personal, social, physical, educational, and vocational needs;**
- 4. Victims adequately heard, served, and protected by the justice system;**
- 5. A strengthened juvenile justice continuum, through collaboration with stakeholders, communities, and families; and**
- 6. Evaluation of program quality, outcomes, and effectiveness.**

Ensuring community safety refers to both immediate and long-term safety. The Division of Juvenile Justice (DJJ) will place youthful offenders in secure facilities that provide treatment and rehabilitation aimed at reducing risk and increasing protective factors. Long-term safety will require ongoing efforts with local stakeholders to determine strategies to most efficiently and effectively protect communities and rehabilitate youthful offenders.

The primary goal of the new Division of Juvenile Justice (DJJ) is to enhance public safety, by providing a safe, secure, productive, and accountable system in which staff, local stakeholders, victims, the community, youthful offenders and their families work toward returning youthful offenders to the community as responsible and productive citizens.

## **1) Provide safe, secure facilities**

Safety and security are the foundation of a responsible justice system. Positive change can occur only when staff and offenders feel safe. To provide safe, secure facilities, the top priorities will be to:

- **Increase the staff to youth ratios;**
- **Develop and implement a long-term plan to provide smaller living units; and**
- **Provide staff with specific skills to manage youthful offenders in a responsive manner.**

Enhanced staffing on smaller living units will allow more time for interaction with the youth, quicker response to misconduct, and more opportunities for individual interaction. Rehabilitation/treatment will be improved by offering additional small groups and more individual counseling. By having more staff, with fewer youth, safer units are possible.

- Staff will be trained on a variety of conflict resolution, mediation, negotiation and de-escalation techniques;
- Special emphasis will be given to addressing issues of gang involvement, gang violence, and ethnic tensions;
- Behavior management techniques will be enhanced to respond to youthful offenders through a strength-based system of graduated sanctions, contingency management, and incentives;
- Staff will be provided specific motivational enhancement strategies to work with youth who are resistant to programming;
- Each unit will combine accountability and rehabilitation components designed to deter future delinquency and protect the community.

A process will be put in place to review staff duties and the needed functions of each unit. A plan will be developed to assign responsibilities to the appropriate staff and provide training and performance support to ensure staff can adequately and safely perform the functions expected of them.

In addition, recognizing that the physical plants and environments of DJJ facilities should promote and facilitate the goals of the program, each existing facility will be evaluated to determine what improvements are needed to meet this challenge. A long range plan is being developed to modify existing facilities and/or identify new facilities needed to safely meet the needs of the DJJ population.

## **2) Provide effective rehabilitative treatment to reduce recidivism**

California is committed to developing an effective model for treatment and rehabilitation of youthful offenders. Youth committed to DJJ have typically utilized and exhausted local and/or community-based behavior management and treatment resources. Their service needs can be both acute and complex. Youthful offenders committed by the Juvenile Courts will eventually be released to the community. Therefore, reducing recidivism through research-based rehabilitative programs will be a key component to long-term public safety.

While the model will need to be adapted for different populations, there will be a standardized core program implemented throughout the system. The goal of the program is successful re-entry to the community. Planning for re-entry into the community will begin upon entry to the system. All staff will be trained on the core program model and quality assurance measures will be implemented that increase communication and create a process for continual improvement. This process will also facilitate sharing expertise across facilities.

A comprehensive system will be established to accurately assess the risks and needs of the youthful offenders and match rehabilitation/treatment services to meet their needs, while building on and developing strengths and protective factors. As part of the comprehensive system, DJJ will utilize assessments to identify:

- Appropriate facility/unit/program placement
- Targets for intervention (risks/strengths)
- Needs not necessarily linked to offense behavior (e.g. mental health, medical, education)

In addition, reassessments will be utilized to determine progress and modify interventions, programs, and strategies accordingly, to increase effectiveness.

The Principles of Effective Intervention (Andrews & Bonta, 1994) will provide a framework for the new rehabilitative model. These include:

***Risk Principle*** – Match the intensity of treatment/services and supervision to the risk level of the offender.

***Need Principle*** – Target criminogenic needs (dynamic risk factors that are closely linked to offending).

***Responsivity Principle*** – Deliver interventions in a style and mode that is consistent with the ability and learning style of the offender and match practitioner style and mode of intervention to the special offender characteristics.

***Program Integrity Principle*** – *Use assessments and programs as intended; ensure staff is properly trained and there is adequate oversight/monitoring of the program to ensure quality services and evaluation of outcomes.*

DJJ will use program criteria from the “What Works” literature to guide in the selection and/or improvement of programs for our youthful offenders.

***Professional Discretion Principle*** – Recognizing that no assessment, criteria, or model can account for all variables, the system must expect staff to consider risk, need and responsivity, and allow for “override” decisions to be made, as appropriate. Override decisions will be monitored and evaluated.

Youthful offenders will be required to participate in rehabilitative efforts in areas identified as strongly related to future criminal delinquency. In order to provide effective interventions, staff must be able to assess the youthful offenders' willingness to participate in interventions and be able to motivate and engage them in treatment. Staff will be trained to assess the **stage of change** (Prochaska and DiClemente, 1982) the youthful offender is at, and will be provided skills training in **motivational interviewing** (Miller and Rollnick, 1991, 2001) to assist them in engaging youth in interventions.

### **3) Preparing youth for re-entry to the community by providing opportunities to address personal, social, physical, educational, and vocational needs**

The Division of Juvenile Justice recognizes a responsibility to promote healthy development of the youthful offenders in its custody. Therefore, in addition to addressing criminogenic needs, DJJ will provide treatment for mental health, will ensure gender specific interventions, will address ethnic tension and gang related issues and will promote the healthy development of youthful offenders.

- Programming will have a strong educational focus, with priority on pursuing and obtaining a high school diploma when possible, and will include opportunities for post-secondary education for youth with a high school diploma or GED;
- Vocational programs will train youth in marketable skills and will provide skills and support necessary to obtain and maintain employment;
- Recreation and religious services will be available and accessible;
- Cultural awareness and sensitivity will be promoted;
- Rehabilitation/treatment and services will build on strengths, promote independence and self-reliance, and develop competencies and life skills;
- Assessments will be done, and individual treatment will be provided, to address special needs.

### ***Female Population***

DJJ recognizes that the needs and issues facing delinquent females are different from those of delinquent males and require a gender-appropriate response. A comprehensive approach will be incorporated in programming for females to address the social context of their lives, their relationships with staff, each other, their families and communities, and to address their unique needs and issues (e.g., physical/sexual/emotional victimization, trauma, physical and mental health, pregnancy and parenting) in a safe, trusting, supportive and gender-responsive environment.

### **4) Guarantee that victims are adequately heard, served, and protected by the justice system**

The entire continuum will be responsible for enforcing the rights of victims and survivors, ensuring victim safety and constructively including victims' voices. Interventions will incorporate increasing offenders' understanding of the harm caused to their victim(s) and/or survivor(s) and the community. DJJ will require accountability of youthful offenders demonstrated by an awareness of the impact of their crime(s) on victims, and by their

compensation to victims and communities. Youthful offenders will be expected to find ways to make amends to victims through restitution, community service, and active involvement in repairing harm caused, when appropriate.

**Victim reparation goals:**

- Restitution is a priority;
- Victims' voices are heard;
- Victims are involved in offender programs if they choose to be;
- Youthful offenders recognize the impact of crimes;
- Future victimization is prevented;
- Victims receive on-going communication and notification of offenders' status;
- Youthful offenders have conditions of no-contact with victims, as appropriate;
- Victims receive internal/external service referrals;
- Restraining orders are enforced;
- Victim proximity is considered when determining parole placement;
- Youthful offenders are provided opportunities to practice making amends when harm is caused.

**5) Strengthening the entire juvenile justice continuum, through collaboration with stakeholders, communities, families and support networks**

Successful reintegration of youth into the community will require involvement and active participation of communities, families/other support networks, the youth, and other stakeholders. DJJ will strengthen the continuum of services through:

- Increased communication and information sharing among all stakeholders in an open, solution-focused manner, dedicated to quality improvement;
- Working with the counties and other stakeholders to ensure that the entire juvenile justice continuum is continually improving;
- Developing system improvements and finding additional ways to share resources and enhance services provided;
- Engaging family members in all aspects of the youths' rehabilitation/treatment, when not detrimental to the youth's success;
- Providing incentives to families for involvement in opportunities to increase skills and/or participate in treatment;
- Inviting families to assist in identifying opportunities of involvement and opportunities for referrals or direct services to meet needs that will assist youth in successful reintegration.

**6) Continuously evaluate program quality, outcomes, and effectiveness**

A strong Management Information System is necessary to efficiently measure the effectiveness of the new model. Each goal will have identified expected outcomes. A plan will be developed to track outcome measures electronically. An interim plan may need to be developed to track information manually, until the electronic, automated tracking is available. Specific measures of success will be pre-determined. Staff will be trained on what to document, who is expected to document it, how it will be documented and when it will be documented. Documented information will be periodically and randomly audited to ensure integrity of the data.



Each new component of this plan will be linked to an expected outcome. As components are implemented, auditing and evaluation measures will be put in place to measure specific achievements and short and long-term outcomes. A process improvement model will be developed to ensure DJJ can continue to make incremental progress and build on successes.

The new model must be implemented thoughtfully and incrementally. As processes and programs are implemented, the agency must ensure time for evaluation and input from experts to guide improvements and assist in building on successes.

DJJ will implement nationally recognized Performance Based Standards (PbS), designed to improve conditions of confinement in juvenile facilities.

## II. Safety & Welfare Plans

## Improving the Process of Accepting and Placing a Youthful Offender

## INTAKE

### **Current Approach**

#### Intake and Court Services Process

Prior to a youthful offender's arrival at a Reception Center, case materials from the counties are reviewed for completeness, legal compliance, appropriateness of commitment, and availability of alternative dispositions.

Intake and Court Services (ICS) staff makes the decision to accept or reject a case based on the information provided from the counties. When a case is accepted, the referral document is prepared, an identifying number is assigned, and the Board Hearing Category (BHC), Projected Board Date (PBD), and date of the Annual Review (AR) are determined per guidelines established in the California Code of Regulations Title 15, Division 4.5. The committing county court/probation department is notified of the acceptance time and location for delivery. When the decision is made to reject a case, ICS notifies the court and appropriate county official of the decision and reason for the rejection.

#### Reception Center Process

Complete diagnostic services are conducted at the Reception Center on all newly committed youthful offenders, county referrals, diagnostic placement (assessment of minors remanded to the Adult Court) and out of state contract cases. For recommitted youthful offenders and parole violators, either a complete or a partial diagnostic assessment is completed.

Currently the major purpose of the Reception Center is to complete a thorough assessment of each individual youth to make placement decisions, identify specialized treatment needs, and develop preliminary individualized treatment recommendations. All youth are given a battery of tests and evaluations in the following areas: mental health/health problems, escape risk, suicide risk, gang affiliation, placement issues, sexual predator or victimization, cognitive functioning assessment, education assessment, and high school graduation requirements. (See Table 1) In addition, the following screenings occur: sexual behavior treatment program screening, camp eligibility screening, INS screening, HIV testing as required, and DNA, blood, saliva and palm/finger print collection.

Table 1. Assessments Completed at Reception/Intake

- Ward Assessment Report – Prepared immediately upon arrival to assess critical needs, i.e., escape risk, suicide history, gang affiliation, mental health/health programs, placement issues, sexual predator or victim and violence potential
- Medical – Physical exam and evaluation of medical history, particularly HIV and TB testing
- Dental – Dental exam and evaluation of dental history
- Treatment Needs Assessment (TNA) - Battery of tests to gauge severity of specific mental health and/or substance abuse issues, including suicidal ideation, depression, anxiety, PTSD and anger problems. Includes: MAYSI, YSR, WAI, DEQ, Cognitive functioning assessment to identify and assess possible cognitive deficits
- Special Program Assessment Needs (SPAN) – Red flags identified in the TNA scales trigger referral to mental health clinician to conduct an in-depth psychological evaluation, referral to a psychiatrist for medication evaluation, screening for possible inclusion in an ITP/SCP
- Suicide Risk Screening Questionnaire - SRSQ
- Sex Offender Program referral screening
- Education Assessment and development of the initial High School Graduation Plan–basic academic testing for reading and mathematics. Students with low functioning scores are scheduled to meet with the School Consultation Team. Any student with a current and active Individual Education Plan (IEP) is immediately placed in special education services. Students that have IEP needs but whose paperwork is older than 2 yrs, 11 months require a psychological, academic and sometimes speech/language assessment. Students with second language issues are tested and provided English Language Learner Services
- Clinical Report – comprehensive summary of youthful offender’s life to date, including current offense information, history of delinquent behavior and corrective intervention attempts, family and socio-economic background, peer relationships including gang involvement, academic achievements and work experience
- Gang Orientation and Advisement about options and opportunities to not get involved in gang activity. Validation of gang membership is based on “self admission” criteria
- Screen for camp placement
- INS screening
- P.C. 290.2 Pre-registration with DOJ (Sex Offenders). Collect blood, saliva and finger/palm prints
- DNA Sampling
- Custody/Security Classification
- Kaufman Adolescent and Adult Intelligence Test
- Adaptive Functional Scale
- Education Assessment- CASAS and CELDT testing

### Timeframe for the Intake Process

The intake process is currently completed within 45 days of the youthful offender's arrival. If required, an education assessment to update an Individual Education Plan (IEP) takes approximately 60-80 days dependent upon parental notification and participation.

Upon completion of the testing and evaluation process, an Individual Change Plan (ICP) Part I is developed by staff. The ICP includes information about the commitment offense evaluation, Board Hearing Category, Projected Board Date, registration information, suicide risk, psychological assessment and screenings, and education and treatment issues.

An Initial Case Review (ICR) is then conducted by Reception Center staff to review the ICP and treatment, education and placement recommendations of staff. Upon completion of the ICR, within 60 days of arrival, a copy of the ICP is sent to the juvenile court and probation department in the committing county and the youthful offender is transferred to the appropriate facility.

### Challenges/Problems with the Current System

Under the current system, acceptance and rejection criteria lack clarity. Youthful offenders who are rejected are simply returned to the court for a new dispositional hearing, whether the court has any other viable alternative or not. Currently, DJJ does not have a formal process to track or follow up on rejected cases.

Several counties are expressing serious concern over their ability to find appropriate alternatives for these offenders. This tension calls greater attention to the need for DJJ to clarify its rejection criteria and to work with the counties to identify, or perhaps create, appropriate alternatives.

DJJ has no staff positions dedicated to serve as liaisons with the counties. Moreover, at present there is only one Intake and Court Services Consultant position dedicated for the entire state to perform the intake functions described above. The results are delays in processing intakes and an increased likelihood that cases not appropriate for DJJ are accepted. Many youthful offenders with special education needs arrive at the Reception Center without the required IEPs. This results in the intake process taking an additional 15-35 days, delaying development of the ICP and transfer to an appropriate facility.

With the implementation of Statutes 2003, c. 4, SB 459, the Initial Hearing process was eliminated and replaced with the Initial Case Review (ICR). Subjective determinations are being made on Board Hearing Category/Parole Board Date by Intake and Court Services staff and confirmed by the Parole Board, often without sufficient information from the counties on the impact to the victim, family issues, prior correctional background, and circumstances of the committing offense(s), all necessary to appropriately determine BHC and PBD. With the implementation of Statutes 2003, c. 4, SB 459, elimination of the Initial Hearing Process also eliminated an avenue for victims, parents, and offenders to provide input and clarification into intake process.

Pursuant to the Victims Bill of Rights, California Constitution Article I, 28, WIC 656.2, victims are entitled to be informed about their rights to notification and restitution. In the cases that are

committed to the DJJ, many of the probation departments have had no contact with the victims, due to the expediency of the Juvenile Justice process, the inability to locate victims, and/or the lack of response to outreach. Therefore, in many instances, victims are not informed of their rights, restitution is not ordered and victims are not included in the criminal justice process.

Two significant policy decisions in recent years have negatively impacted the Reception Center process. The first, in 1991, eliminated the Youth Correctional Counselors (YCCs) at the Reception Centers and replaced them with Youth Correctional Officers (YCOs). This eliminated a majority of treatment services at the Reception Centers, creating a custody and security focus, rather than focusing on treatment during the youth's orientation to DJJ, which can be a time of uncertainty. The second was the closure of the Northern Youth Correctional Reception Center and Clinic (NYCRCC) in March 2004. After this, the Reception Center process in Northern California for new commitments was transferred to a treatment facility and intake for parole violators (PV) was transferred to three different facilities, creating a disjointed approach to handling this potentially fragile population and adversely affecting existing programs and staff resources.

Additionally, moving the Reception Center process to open dormitory settings in some facilities has posed significant challenges. For example, no dedicated single rooms are available for use in crisis situations. Staffing complements were only given for new commitments; no staffing complements were given to the facilities that handle PV populations.

As noted in Table 1, there are a variety of screenings/assessments completed at Reception. However, the collected information is not compiled in an objective or efficient manner and is not regularly disseminated to staff in the facilities / living units to which youthful offenders are assigned. Decision making can therefore be subjective and does not always take the assessment results into account. The Assessment/Classification and Placement section of this report describes how DJJ intends to address this issue and remedy the identified deficiencies.

An additional significant problem with the current Reception and Intake processes is that youthful offenders at Reception Centers receive only one-half (1/2) day of educational instruction, instead of the 240 minutes mandated by the Education Code..

### **Proposed Changes**

DJJ proposes to strengthen the partnership between the state and local juvenile justice systems to ensure that appropriate services and interventions are provided for youthful offenders. To that end, reforms include increasing communication with counties about pre-commitment assessments; clarifying acceptance/rejection criteria; enhancing individual planning, family and victim involvement; and collaborating more effectively with community, court, and law enforcement partners on intake and assessment-related issues. In the short term, DJJ plans to conduct intake functions at one facility in Southern California and two facilities in Northern California—one for youthful offenders under 18 and one for those 18 and over.

#### Immediate:

- DJJ is working with state and local partners to develop, by March 1, 2006, a formal rejection process to address particularly those youthful offenders with complex medical conditions, persistent and serious mental health care needs and/or developmental disabilities, who cannot materially benefit from a commitment to DJJ.
- DJJ will clarify its policies to accept only youthful offenders who are appropriate for the state's facilities (i.e., those who are higher risk/higher need) and will work with the counties to develop strategies to ensure that offenders who do not meet the criteria for commitment to DJJ, but have exhausted all local options, are appropriately served and not just "dumped" back on the counties.
- DJJ will work with state and local entities, including DMH, DDS, probation, and private community based organizations to identify those kinds of youthful offenders who would be more appropriately served outside a correctional setting.
- For those youth who are accepted, DJJ will physically admit only those new commitments who arrive with required documentation and thorough review and assessment of their significant mental health problems, medical conditions, developmental disabilities, and/or sexually violent offenses.
- DJJ will begin working with counties on statewide definitions related to "risks" and "needs" and will explore long-term strategies for conducting initial classification /assessment while the youthful offender is in county custody. This is intended to facilitate counties recommending the most appropriate commitments to DJJ. Counties conducting initial assessments would also help expedite the DJJ Reception Center process and encourage quicker placement into a DJJ facility for youth committed to the State.

#### Phase I:

- DJJ will consolidate intake at one facility in Northern California for youthful offenders under 18 and at one facility in Northern California for those 18 and over to maximize effective use of resources and facility capacity. Centralizing intake will allow more single room options to enhance safety for staff and youth. (Note: Intake is already centralized in Southern California.)
- DJJ will improve the number and quality of treatment services provided at Reception Centers. Additionally, because the initial intake/clinic process is often crisis-oriented and difficult for DJJ commitments who are anxious about the new environment, DJJ intends to replace the Youth Correctional Officers who currently staff Reception Center living units with Youth Correctional Counselors in order to enhance interventions and positive interactions between youthful offenders and staff.
- DJJ will centralize intake, assessment and programming processes for the parole violator (PV) population in order to provide more timely identification of rehabilitation/treatment needs, interventions and recommendations for individualized relapse plans that address parole violation behaviors (i.e. substance abuse, domestic violence, etc.).
- DJJ will establish dedicated Community/Court Liaisons to work in counties to improve communication, relationships and collaboration with the community, courts, probation and law enforcement. The responsibilities of Community/Court Liaisons will include: obtaining information on assessments, family input, victim impact, and court ordered restitution; conducting pre-screening and consultative services; providing orientation and



information on DJJ programs and services; interpreting and clarifying intake policies and procedures; assisting counties with identifying alternative strategies for youthful offenders whom DJJ rejects; and working with community based and other service provider organizations to foster collaborative relationships related to re-entry planning.

- DJJ will establish dedicated Intake and Court Services positions to track cases that are rejected, identify trends in commitments, and monitor requests for court documents and corrections to commitment orders. Intake and Court Services officers will help expedite the flow of information between committing counties and DJJ and facilitate the physical acceptance of new commitments.
- DJJ will work with counties to analyze the effectiveness of the current “sliding scale” fee schedule and make recommendations for alternative strategies that would better serve the state’s public safety needs.

#### Phase II:

- DJJ will incorporate victim impact and substantial injury information into the individual case plans (currently known as Individual Change Plans, which, in the new model, will be referred to as Individual Change and Accountability Plans (ICAPs). This information will be used to develop detailed intervention strategies that provide opportunities for offenders’ to increase their understanding of the harm they have caused to their victim(s), victim families, and their community. In this way, victim input becomes not just *valuable*, but *vital* to defining the primary accountability of the offender, while also shedding significant light on successful strategies to manage offenders within the institutional setting and in the community. (Gregorie, Lehman, Malone, Russell, Seymour, and Shapiro, 2002)
- The Community Court Liaisons will develop standardized presentations and/or training for county and court personnel on DJJ commitment requirements, available services, program principles, etc.
- DJJ will expand education services at its Reception Centers from one half (½) day to a full day, consistent with Education Code mandates.
- DJJ will increase available education space at the Reception Centers, as necessary, to accommodate a full day of education services.

#### Long-Term:

- DJJ will establish the appropriate facility capacity for intake for new commitments and parole violator populations.
- DJJ will implement statewide definitions and criteria around “risks” and “needs.”

Note: The following section addresses changes to the assessment process.

## ASSESSMENT, CLASSIFICATION, PLACEMENT & REASSESSMENT

### **Current System**

Once a youthful offender arrives at an Intake/Reception Center, there are a variety of assessments completed, which result in a recommendation for placement in a particular facility (see Table 1 in Intake section).

Under the current system, male youth with intensive mental health treatment needs, as well as those with mandated or assessed sexual behavior treatment needs, are prioritized and placed on a waiting list to receive specialized treatment. A dedicated staff person at headquarters maintains the waiting list and identifies which offender will be moved, when a bed opens in one of the needed treatment units. The youthful offender is then transferred to that facility and placed in the identified unit.

For all other newly committed male offenders, i.e., those without specialized treatment needs, an initial case review (ICR) is held. The ICR team discusses the various assessment results, along with other factors, such as age, gang affiliation and committing court. The ICR team recommends a first and second facility choice, in case the first is not available. Those recommendations are sent to a staff person at headquarters (different from the one mentioned above), who makes the facility placement decision, based on available bed space, attempting to place the offender at the first or second choice facility recommended by the ICR team. Once the offender is brought to the new facility, a staff person from that facility makes the determination into which living unit the offender will be placed, based on population, age, and other criteria.

Parole Violators and/or offenders who are returned to DJJ after serving time in an adult CDCR facility, are assessed at one or more of the facilities, not at an Intake/Reception Center. Neither the assessment nor the placement process is standardized for these return offenders.

Newly committed females are brought to one facility in Southern California. Assessment and Classification for the female population does not involve facility placement decisions, as there is currently only one facility that houses DJJ's female offenders.

### **Challenges/Problems with the Current System**

Despite the battery of assessments that is currently completed, the process used to recommend facility placement for male offenders (those not slated for placement in mental health or sex behavior treatment units) is quite subjective. The offender may or may not be placed at the facility recommended by the ICR team, due to bed space availability. Once the offender arrives at a facility, he is placed in a unit, based on subjective, non-evidence-based criteria, which may or may not be related to his risk and/or rehabilitative needs. Without objective criteria for unit placement, the process will continue to remain subjective and bed space will continue to drive the process. Without a statewide electronic information management system, placement decisions cannot be effectively managed, monitored and evaluated. Due to the smaller number of females, placement decisions for that population may be even more subjective.

Furthermore, there is a current disconnect between the assessments that are conducted at the intake facilities and the offender's individual case plan, referred to in the current system as an Individual Change Plan (ICP). ICPs are initiated by the intake staff, before they know where an offender will be placed or what resources (programs) will be available on that unit. In addition, the staff who work with the youth on a daily basis are not always aware of the various assessment results and/or the specifics of the various risk/protective factors. This results in staff from different disciplines working with the youth in their specific area, without knowledge of, or relation to, what is being worked on in other areas.

The expert report on General Corrections noted that there was no distinction in risk level for any of the DJJ facilities or units. It was recommended that facilities/units be distinguished by risk, that an interim risk assessment be developed to assist in identifying risk for institutional violence, and that the current population be sorted accordingly, pending purchase design and/or implementation of a more comprehensive risk/needs assessment instrument and process.

At the end of 2004, an interim Security Classification Assessment (SCA) was developed and applied to the population retroactively, classifying youthful offenders as low, moderate, medium or high risk for institutional violence. Although this effort was initiated, full implementation of the interim SCA was postponed for the following three reasons:

1. The interim tool does not include criteria related to violent behavior in an institutional setting, e.g., past history of violence in an out-of-home placement. The criteria used in developing the SCA was based on available electronic data. One way to improve the tool's predictive value at intake, would be to add criteria regarding past history of violence in an out-of-home placement. However, this information is not currently readily available in electronic format, thus applying it to the existing population would require file review on each case to determine if there is documentation regarding behavior while in out-of-home placement, and, if not, further requests would need to be made. Even after the information was provided, analysis would have to be conducted, manually merging the new information with the SCA to determine appropriate weighting, etc. Thereafter, the new assessment criterion would have to be validated.
2. At this time, DJJ has only two types of living units, single rooms and open dorms, both with similar staffing patterns. An analysis of all existing facilities/units determined that living unit style offered the only distinguishing factors in terms of institutional classification given that all facilities have similar security fences. Given these constraints, it was deemed most appropriate to identify single-room units for higher risk youth. Mental health staff felt that higher need youth were also more appropriate for single room units, given the only other alternative of open dorm-style units. Unfortunately, higher and lower risk units are not dispersed geographically across the state. In general, facilities in Southern California offer only single-room units and the majority of facilities in Northern California offer primarily open dorm units, with the exception of N.A. Chaderjian, which is entirely single room units. If DJJ were to decide to immediately make all placement decisions based on the interim SCA, all lower risk offenders would be placed in Northern California, regardless of the region they came from, and the majority of higher risk offenders would have to be placed in Southern

California. This would make it more difficult to involve families in the youth's rehabilitation/treatment and more difficult to provide meaningful re-entry services.

3. DJJ has received budget authority to issue an RFP during the current fiscal year for a comprehensive Risk/Needs Assessment. Rather than moving everyone at once, based on the interim SCA, a phased-in implementation of the long term, more comprehensive risk/needs assessment will allow DJJ to make necessary facility accommodations/modifications, adjust staffing to appropriately address the risk/needs of the youth to be housed in various units and/or facilities and provide training to staff. Further, DJJ, will be in the process of identifying , developing and implementing appropriate interventions for various populations, as well as modifying its plans, as necessary, based on what is learned from the phased in implementation of programs and strategies described in this remedial plan. .

### **Proposed Changes:**

The current research on offender rehabilitation and behavioral change has enabled DJJ to make meaningful inferences regarding what works to reduce recidivism and improve public safety. Based upon previous compilations of research findings and recommendations (Burrell, 2000; Carey, 2002; Currie, 1998; Corbett et al, 1999; Elliott et al, 2001; McGuire, 2002; Latessa et al, 2002; Sherman et al, 1998; Taxman & Byrne, 2001), there now exists a coherent framework of guiding principles. These principles are interdependent and each is supported by existing research.

The National Institute of Correction (NIC), Community Corrections Division entered into a collaborative effort with the Crime and Justice Institute, as a part of a strategy for facilitating the implementation of effective interventions, to develop a model for implementing evidence-based practice in criminal justice systems. The resulting Integrated Model emphasizes the importance of focusing equally on evidence-based practices, organizational change, and collaboration to achieve successful and lasting change. The scope of the model is broad enough that it can be applied to all components of the criminal justice system (pretrial, jail, probation, parole, private/public, etc.) and across varying jurisdictions (local, county, state). The model provides a framework based on eight principles for effective offender interventions within federal, state, local, or private community corrections systems.

This collaboration has determined that an organization or system that is most successful in initiating and maintaining offender interventions and supervision practices consistent with the eight principles will likely realize the greatest recidivism reductions. However, they further add that the biggest challenge in adopting better interventions is not identifying the interventions with the best evidence, so much as it is changing existing systems to appropriately support the new innovations. Identifying interventions with good research and realigning the necessary organizational infrastructure are both fundamental to evidence-based practice. Models provide DJJ with tangible reference points as we face unfamiliar tasks and experiences.

The evidence-based integrated model highlights eight principles for effective offender interventions, as follows:

### Eight Evidence-Based Principles for Effective Interventions

1. Assess Actuarial Risk/Needs.
2. Enhance Intrinsic Motivation.
3. Target Interventions.
  - a. Risk Principle
  - b. Need Principle:
  - c. Responsivity Principle:
  - d. Dosage: Structure 40-70% of time.
  - e. Treatment: Integrate treatment into the full sentence/sanction requirements.
4. Skill Train with Directed Practice.
5. Increase Positive Reinforcement.
6. Engage Ongoing Support in Natural Communities.
7. Measure Relevant Processes/Practices.
8. Provide Measurement Feedback.

The first of the Eight Evidence-Based Principles for Effective Interventions, Assess Actuarial Risk/Needs, includes developing and maintaining a complete system of ongoing offender risk screening / triage and needs assessments. Assessing offenders in a reliable and valid manner is a prerequisite for the effective management (i.e. supervision and treatment) of offenders. Timely, relevant measures of offender risk and need at the individual and aggregate levels are essential for the implementation of numerous principles of best practice in corrections, (e.g., risk, need, and responsivity). Offender assessments are most reliable and valid when staff are formally trained to administer tools.

Screening and assessment tools that focus on dynamic and static risk factors, profile criminogenic needs, and have been validated on similar populations are preferred. They should also be supported by sufficiently detailed and accurately written procedures.

Offender assessment is as much an ongoing function as it is a formal event. Case information that is gathered informally through routine interactions and observations with offenders is just as important as formal assessment guided by instruments. Formal and informal offender assessments should reinforce one another. They should combine to enhance formal reassessments, case decisions, and working relations between practitioners and offenders throughout the jurisdiction of supervision. (Andrews, et al, 1990; Andrews & Bonta, 1998; Gendreau, et al, 1996; Kropp, et al, 1995; Meehl, 1995; Clements, 1996)

DJJ will contract for the identification/development of a comprehensive risk/needs assessment, as described above. Knowing full implementation of that assessment will take several months, as explained in the Introduction, DJJ will phase-in implementation of this plan, beginning with 20 units, including both single-room and dorm-style units. Because most of these units will house youthful offenders who are already in the existing population, disciplinary (DDMS) history will be used to identify youth who have not been involved in institutional violence for the previous 90 days as one of the criteria for placement in the lower risk/dorm-style units. Those youth who have been involved in institutional violence during the previous 90 days will be eligible for placement in the higher risk/single-room units or for placement in a Behavior

Treatment Program, based on severity, number of incidents, and how recently the violent behavior occurred. Placement criteria for Lower Risk (open dorm units), Higher Risk (single room units), and Behavior Treatment Programs will be further defined as external experts are consulted to assist with the implementation of a new classification process.

Offenders identified (by assessment) as needing intensive sexual behavior treatment or intensive mental health treatment will be placed in single room intensive needs units, based on their treatment need, rather than by institutional risk.

During Phase I implementation, Strategies for Juvenile Supervision (SJS) will be phased in at certain locations to determine responsivity issues and place youthful offenders accordingly. (See the Principles section for a discussion on responsivity.) This assessment will be used to assist in separating the more criminally sophisticated youth from the most vulnerable and provide staff with more appropriate strategies for each population.

Beginning immediately, as mentioned previously, DJJ will contract for the development of a risk/needs assessment instrument that will identify risk to re-offend and assess static and dynamic risk factors, protective factors, and skills. This risk/needs assessment tool will include an initial screening instrument that will be completed at Reception and will be used to identify the risk (to re-offend) level. As identified in the Mental Health and Sexual Behavior Treatment Remedial plans, new or additional mental health and sexual offender assessments will be incorporated in the assessment process at Reception. Experts will be consulted to assist in determining which assessments currently used can be eliminated.

In addition to Mental Health and Sex Behavior Treatment Units, DJJ plans to identify higher and lower risk core rehabilitation/treatment units (and medium/moderate as well, in the long term), behavior treatment units and re-entry units. In consultation with the experts, objective entrance and exit criteria for each of the units will be established that incorporates the various assessment results, along with other pertinent criteria, such as gender, age, region of commitment, length of stay, into an objective system for placement in the various rehabilitation/treatment units. A Classification Administrator will have responsibility for oversight of unit placement to ensure youth are placed according to the criteria, and/or that overrides to the placement criteria are appropriate and based on risk/need, rather than bed space. A multi-disciplinary team will assist in reviewing/approving overrides.

The pre-screen of the risk/needs assessment will be completed at Reception and the remaining domains of the risk/needs assessment will be completed at the assigned living unit, by the youthful offender's Case Manager. This is a position new to the current unit staffing configuration, which will be dedicated to case management and rehabilitation/treatment functions. Having the unit Case Manager, rather than Reception staff, conduct the majority of the risk/needs assessment will provide the Case Manager with more comprehensive assessment information (attitude, motivation, skills, relationship of risk/needs to the offense cycle) to increase the ability to incorporate relevant interventions in the Individual Change and Accountability Plan (ICAP, formerly called the ICP).

The dynamic factors in the assessment will be reassessed periodically through a multi-disciplinary team process, to determine if risk is being reduced and protective factors and skills are being increased. The reassessment results (which include identifying the youth's motivation toward change in specific areas) will be discussed at case conferences and will assist in determining changes needed in the interventions, strategies, and ICAP.

The existing information technology system will be upgraded, as needed, so that pertinent assessment, classification, and case management information is accessible to staff statewide and evaluation can be more efficiently and effectively conducted.

### Female Offenders

DJJ will consult with experts in female offenders, to assist in assessing the security risks and rehabilitation/treatment needs of the existing female population. DJJ will develop a placement process based on this analysis, which may include providing services for female offenders in secure placements outside of DJJ facilities. (Refer to Core Rehabilitation/Treatment Program section.)

#### Immediate:

- DJJ will prepare for implementation of Phase I units, including activities around hiring, negotiations, training, and facility modifications to prepare staff and facilities for Phase I.
- DJJ will contract for a risk/needs assessment instrument that determines risk to re-offend, by quantitatively measuring risk, protective factors, and skills that can be re-assessed periodically to determine a reduction in risk and an increase in protective factors and skills. The contract will include software that electronically documents the assessment/reassessment and provides for a case plan that can be electronically accessed by all staff working with the offender.
- DJJ will consult with an expert(s) in classification to assist in development of a comprehensive classification system, which incorporates the various assessment results.
- DJJ will establish a Classification Administrator responsible for oversight of classification and facility/unit placement.
- In conjunctions with experts, DJJ will develop objective criteria for placement in phased in units.
- DJJ will consult with an expert(s) in female offenders to assess the specific safety risks and rehabilitation/treatment needs of this population.
- DJJ will issue a Letter of Interest, to identify a bidders list and determine services for female offenders that potentially could be provided by outside service providers.

#### Phase I:

- DJJ will convene a workgroup, with representatives from each of the remedial plans, and experts on the various assessments selected (i.e. risk/needs, mental health, sex offender), to define objective criteria for placement in all types of units, based on assessment results and other recommended sorting criteria.
- DJJ will develop an electronic format utilizing the objective criteria for unit placement described above, which can be accessed statewide.

- DJJ will implement the Strategies for Juvenile Supervision (SJS) and Client Management Classification System (CMC) assessment in Phase I units and train staff on the strategies. (Training will continue for staff in other units during each of the planned phases)
- DJJ will train dedicated staff to become trainers for the risk/needs assessment/reassessment and the resulting ICAPs. This Training for Trainers will develop in-house expertise and in-house ability to sustain implementation.
- DJJ will train dedicated staff to become trainers in SJS/CMC. This Training for Trainers will develop in-house expertise and in-house ability to sustain implementation.

#### Phase II:

Youth will be placed in living units, based on objective criteria and units will have specific entrance and exit criteria.

- DJJ will evaluate placement decisions, by reviewing the number of recommended and approved or denied overrides, and any changes in behavioral indicators.
- Rehabilitation/treatment unit staff (instead of Intake staff) on Phase I and II units will begin completing the risk to re-offend assessment/reassessment and will become responsible for developing the ICAPs. This will reduce the amount of time spent in Reception Centers.
- DJJ will begin to use reduction in risk to re-offend as part of the exit criteria from higher risk units onto lower risk units.
- DJJ will begin to measure reduction in risk and increase of protective factors as a measure for determining the effectiveness of rehabilitation/treatment programs.

#### Long Term:

- As discussed in the Intake section, DJJ will begin implementation of statewide criteria around risk/needs. (This effort will begin in the Immediate implementation phase, as discussed in the Intake section.)



## ORIENTATION

### Current System

#### Orientation

According to policy, all youthful offenders should receive orientation within 10 days of arrival at a DJJ institution. With the exception of four facilities that have a dedicated orientation unit, most orientation is provided on the offender's living unit. The orientation process may be completed either through an individual interview with staff or through a small group setting in which youthful offenders are oriented and provided information on the following areas:

<ul style="list-style-type: none"><li>▪ Youthful Offenders Rights</li><li>▪ DDMS</li><li>▪ Grievance Procedures</li><li>▪ High School Education Requirement</li><li>▪ Religious Services</li><li>▪ Institutional Rules and Regulations</li><li>▪ Recreational and Sport Programs</li><li>▪ Special Counseling Programs</li><li>▪ Pre-parole Checklist</li><li>▪ Off-Grounds Activities</li><li>▪ Public Service Requirement</li><li>▪ Camp Criteria</li><li>▪ Volunteer Programs</li><li>▪ Time-Cut Policy</li><li>▪ Medical/Dental Services</li><li>▪ Psychiatric/Psychological Referral Process</li></ul>	<ul style="list-style-type: none"><li>▪ Suicide Prevention Awareness</li><li>▪ Treatment Modalities</li><li>▪ Other Resources and Specialized Programs</li><li>▪ Visiting</li><li>▪ Mail</li><li>▪ Behavior and Performance Expectations</li><li>▪ Employee Communication with Offenders</li><li>▪ Three Strikes You're Out Notification</li><li>▪ 10-20 Life Notification</li><li>▪ Peace Officer Notification</li><li>▪ Prop 69 DNA Notification</li><li>▪ Prosecution Notification</li></ul>
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#### Family Orientation

Orientation for families occurs when a youthful offender is accepted at the Reception Center. Written notification is sent to the family and/or next of kin notifying them of the youth's arrival along with detailed information about visiting, mail procedures and contact information. Additionally, the Parole Office where the offender will eventually be paroling sends a letter to the family and/or next of kin to notify them of the Community Parole Orientation Program. This program includes a monthly meeting where parole staff disseminate information regarding the Department and answer specific questions from youthful offender's families.

Every facility has recently established a Family Council which provides a forum for parents to meet on a monthly basis with the Superintendent and management staff, providing them the opportunity to address complaints and potentially be involved in programming and policy decisions.

### Victim Orientation

Orientation for victims/survivors occurs at the time of intake. The Office of Victim and Survivor Services (OVSS) generates an outreach letter to the victims and/or survivors informing them of their rights to information, offender status, notification and restitution. With the letter, OVSS sends a self addressed envelope for victims to return notification and restitution request forms and brochures on their rights to information, restitution and attendance at parole hearings. For cases where little to no information is provided by the counties, OVSS contacts the county court, probation, DA and victim/witness program either by telephone and/or in writing.

### Challenges/Problems with the Current System

The current orientation process for youthful offenders varies significantly by facility. The information provided is not standardized nor does it include any information about restitution obligations or victim impact.

Very little information is provided to youthful offenders on what to expect at DJJ prior to their arrival. Many offenders come to DJJ believing that they must fight or join a gang to avoid becoming the victim of physical or sexual assault.

Despite good intentions, the Community Parole Orientation Program and the Family Council are often poorly attended.

### Proposed Changes

DJJ will standardize its orientation program, ensure timely and accurate information is provided, increase the use of “resident offenders” for orientation, and enhance family and victim outreach and involvement.

#### Phase I:

- DJJ will standardize orientation processes for all offenders to include victim impact and restitution information. The inclusion of victim impact information and restitution obligation into the orientation program will teach offenders to recognize the impact of crime and will begin the process helping them take responsibility for their behavior and for repairing the harm caused to their victims, the community, their families and themselves.
- DJJ will develop strategies to provide intensive outreach and inclusion of parents and families immediately upon a youth’s commitment to DJJ. (See Re-Entry Planning section.)
- DJJ will establish Community/Court Liaison positions to provide avenues for family involvement much earlier in the DJJ commitment process. Community Court Liaisons will educate families and probation and court personnel about DJJ programs and services so that families are notified sooner on what to expect once their child is sent to DJJ and informed about how they can remain involved in their child’s rehabilitation/treatment.

Phase II:

- DJJ will provide orientation at the county/juvenile hall level. Information provided will give youthful offenders an opportunity to learn and understand that there are available resources within DJJ to rehabilitate. This information is intended to help to alleviate youthful offenders' fears and dispel the myths about DJJ.
- DJJ will provide information on positive incentives and the disciplinary system. The better informed offenders are, the better prepared they will be to make pro-social decisions.
- Youthful offenders who have established pro-social behaviors will be used as part of the orientation team for new youth assigned to the unit. As a positive incentive for youthful offenders, "resident offenders" will serve as peer leaders/mentors to the newer arrivals. These offenders typically will have been meeting their rehabilitation/treatment program goals. These youth will assist with orientation, help to identify issues of potential conflict and will help to resolve them through communication and positive interaction. The use of "resident offenders" supports the principles of "normative culture."
- DJJ will revise its Youthful Offenders' Rights Handbook to include new program changes.

## Improving Rehabilitative Outcomes for All Youthful Offenders

## SUBSTANCE ABUSE PROGRAMMING

### **Current System**

DJJ currently offers two types of institution-based substance abuse programs. Both programs address the treatment of addictive behaviors and chemical dependency. The Substance Abuse Treatment Program (SATP) is a 6-month program, with approximately 20 hours of treatment per week plus school. The short-term Substance Abuse Program (STSAP) is a 4 month program, offering approximately 24 hours of treatment per week, for parole violators 18 years and older. Youthful offenders are expected to participate in and complete a curriculum providing treatment and training delivered through a therapeutic community (TC) model.

Treatment for the Substance Abuse Treatment Program is delivered through Hazelden's "A New Direction" curriculum; "My Personal Journal" developed by The Change Companies; large groups; and the development of a Personal Life Plan. Additionally, youthful offenders address commitment offense/violation offense, victims' issues, employability skills, anger management, gang awareness, and parenting through regular small groups, written assignments, and individual counseling.

The therapeutic community structure was designed to provide a social learning environment through both large and small group processes. The academic component provides each youthful offender with four hours per day, five days per week, of direct, institutional contact with a teacher. Youthful offenders participating in education classes are expected to make reasonable progress on completing their High School Graduation Plan. Special Education students receive Designated Instructional Services (DIS) counseling, speech, language, or other resource services as required in their Individualized Education Plans (IEP).

Treatment for the Short Term Substance Abuse Program (for parole violators) is delivered through the following curricula; The Serenity Series (Hazelden) based on the 12-Step model, skills, relapse prevention (utilizing the "Beat the Streets" video and workbook series), My Personal Journal (The Change Companies), Employability Skills, Large Groups, and the development of a Personal Life Plan. Additionally, youthful offenders are expected to address commitment offense/violation offense, victim issues, and gangs through regular small group and individual counseling.

### **Challenges/Problems with the Current System**

When the substance abuse program was implemented, staff assigned to these units were provided specific training. Continual staff turnover has resulted in the loss of trained Youth Correctional Counselors (YCCs) on these units and there is a lack of sufficiently trained relief staff to cover vacation and sick leave. Initially, psychologists were available to address dual diagnosis and crisis issues. Those services are no longer being offered to all youthful offenders in the substance abuse programs. There is no dedicated position with responsibility for program development, implementation or oversight of the substance abuse programs and there is no outcome data to determine effectiveness of the program.

DJJ research staff have estimated that up to 80% of youthful offenders in the DJJ population have substance abuse disorders, based on available data from assessments conducted at intake. However, admission to SATP is limited to youthful offenders who are within 10 months of release and meet certain behavioral requirements within the previous 60 days, resulting in many youth with substance abuse disorders not receiving specialized substance abuse treatment. In addition, DJJ does not have an assessment tool that effectively distinguishes between youthful offenders with substance abuse issues and those who need more intensive substance dependence treatment.

### **Proposed Changes**

In the short term, DJJ will ensure that the existing substance abuse programs are staffed as originally intended and that staff on these units are provided appropriate training. Since it is estimated that a majority of the DJJ youth have substance abuse issues, substance abuse treatment will be incorporated within the Core Program Model. Experts will be consulted to assist in developing a process to ensure youth are adequately assessed as part of the classification, placement and case planning process (described in the Assessment section) and that interventions are provided based on intensity of risk/need, rather than prioritized by time left to serve or institutional behavior.

In the short term, DJJ will consult with subject matter experts to develop/implement strength-based interventions, designed to address higher risk/higher need youth at various stages of change. In the long term, specific units will be designated for higher risk youth with substance dependence issues and the interventions developed by the consultants will be implemented.

#### **Immediate:**

- DJJ will identify SATP/STSAP staff who have not received initial training.
- DJJ will increase availability of volunteer AA/NA support groups within the institutions.

#### **Phase I:**

- DJJ will ensure that the existing substance abuse programs are fully staffed.

#### **Phase II:**

- DJJ will ensure staff (including relief staff) in the substance abuse units are provided training (The initial startup teams for both programs were originally given 80 hours of curriculum and delivery systems training)
- DJJ will provide oversight to monitor and ensure compliance with program design.

#### **Long Term:**

- DJJ will establish a dedicated position to ensure the availability of AA and NA for every youthful offender wishing to participate.

Additional changes to substance abuse interventions are incorporated in the Core Rehabilitation/treatment Program. (See next section)

## CORE REHABILITATION/TREATMENT PROGRAMS/SAFE AND SECURE LIVING UNITS

### **Current System**

DJJ has a total of 75 operating living units, 54 of which house youthful offenders who are considered to be “general population” or “GP.” Of the remaining units, there are 12 mental health units, four sexual behavior treatment units, five substance abuse treatment units, and five special management units. The average GP living unit size varies from about 30 to over 60. Staffing also varies. In general, however, staffing patterns on “GP” units are five post, with two Youth Correctional Officers (YCCs) on 2<sup>nd</sup> watch and three YCCs on 3<sup>rd</sup> watch, and one Youth Correctional Officer (YCO) on 1<sup>st</sup> watch.

A youthful offender placed in “general population,” arrives on a living unit with an initial Individual Change Plan (ICP) that was developed, based on file review and assessments, by staff at Reception/Intake. These ICPs provide generic suggested change targets developed before staff knows to which facility or unit the offender will be assigned, or which resources will be available.

The essential rehabilitation activity offered in general population is covered in 14 workbook journals that were designed to cover topic areas addressing criminogenic factors. Youthful offenders are expected to complete the reading and exercises on their own, during the week, and process and share that information in small groups facilitated by a Youth Correctional Counselor (YCC). Core topic areas are completed in four week blocks. New workbooks are provided at the beginning of each topic area.

Each posted YCC is assigned a caseload of up to 11 youthful offenders for whom the YCC is to provide formal and informal counseling services. A minimum of one hour (usually small group as described above) per week of formal counseling is to be provided. There is no minimum requirement for informal counseling.

Other programs/resource groups are available (varies by institution), including: anger management; informal drug programs; impact of crime on victims; parenting education, etc. None of these programs is implemented system-wide nor is any evaluated for effectiveness.

### **Challenges/Problems with the Current System**

Current living unit sizes and staffing patterns do not allow staff adequate time to interact with youth and/or provide direct supervision for structured activities. The result is unproductive and potentially volatile idle time and/or youth spending unnecessary amounts of time in their rooms.

Reception Center staff who conduct the assessments and develop the initial ICP have no further involvement with the youthful offenders. Unit staff receiving the ICP do not have the benefit of all the information gained during the assessment (youth attitude, motivation to change, relationship between risk/need factors, etc), which is crucial for on-going case management. There is no direct relationship between the assessments and the ICPs. Moreover, assessments are done only once, so there is no objective ability to measure change over time.

Because they have multiple custody-related functions, YCCs are rarely able to complete the required minimum one hour of formal counseling, which in itself would be insufficient to address rehabilitative change. As a result, most rehabilitation time consists of youth filling out workbooks on their own, without the benefit of staff feedback.

The average length of stay (LOS) at DJJ for newly admitted youth (not parole violators) is approximately 35 months (ranging by board category from approximately 8 to 80 months). LOS is significantly longer than the 14 weeks covered by the workbooks. This results in youth having to repeat the workbook journals once they complete the series, as there are currently few other options for programming on “general population” units.

As indicated in the Substance Abuse Section, it is estimated that approximately 80% of DJJ youth have substance related issues, yet only a small percentage of those youth receive formal substance treatment.

### **Proposed Changes**

#### **Eliminate the Concept of General Population**

The concept of “general population” units will be eliminated and replaced with the recognition that every youthful offender at DJJ has specific rehabilitative and treatment needs related to his or her offending behavior that must be addressed through the Individual Change and Accountability Plan (ICAP) and the Core Rehabilitation/Treatment Program. Through a phased-in implementation, each higher and medium/moderate risk/need unit will have a specific rehabilitative/ treatment focus, i.e., substance dependence, violence reduction, sexual behavior treatment, etc. Expert consultants will assist with developing the objective placement criteria and interventions for these units. Additional services related to specific treatment needs will be available to youth in all core units, as needed, to supplement the treatment they will receive in their units. Rehabilitation/treatment in lower risk units will focus on relapse prevention, self-regulation and life skills. Youth in less restrictive environments will be provided opportunities to practice skills learned and will be coached by staff, provided opportunities for self-reflection, problem solving and processing of feedback.

Risk/needs assessments will be completed at the rehabilitation/treatment units, by designated Case Managers, who will be responsible for developing the youthful offender’s Individual Change and Accountability Plan (ICAP). ICAPs will incorporate objectives to address the individual risks and needs identified for each youthful offender to reduce the risk to re-offend, while building on identified protective factors, and skills. A major shift will be that the ICAP will address pro-social long and/or short term goals of the youth. ICAPs will be developed to ensure rehabilitation/treatment services target interventions based on the following evidence-based principles:

**Risk Principle:** Prioritize primary supervision and treatment resources for offenders who are at higher risk to re-offend. Successfully addressing this population requires smaller caseloads, the application of well developed case plans, and placement of offenders into sufficiently intense cognitive-behavioral interventions that target their specific criminogenic



needs. (Gendreau, 1997; Andrews & Bonta, 1998; Harland, 1996; Sherman, et al, 1998; McGuire, 2001, 2002)

**Need Principle:** Target interventions to criminogenic needs. Address offenders' greatest criminogenic needs. Offenders have a variety of needs, some of which are directly linked to criminal behavior. These criminogenic needs are dynamic risk factors that, when addressed or changed, affect the offender's risk for recidivism. Examples of criminogenic needs are: criminal personality; antisocial attitudes, values, and beliefs; low self control; criminal peers; substance abuse; and dysfunctional family. Based on an assessment of the offender, these criminogenic needs can be prioritized so that services are focused on the greatest criminogenic needs. (Andrews & Bonta, 1998; Lipton, et al, 2000; Elliott, 2001; Harland, 1996)

**Responsivity Principle:** Responsivity requires that we consider individual characteristics when matching offenders to services. These characteristics include, but are not limited to: culture, gender, motivational stages, developmental stages, and learning styles. These factors influence an offender's responsiveness to different types of treatment. The principle of responsivity also requires that offenders be provided with treatment that is proven effective with the offender population. Certain treatment strategies, such as cognitive-behavioral methodologies, have consistently produced reductions in recidivism with offenders under rigorous research conditions. Providing appropriate responsivity to offenders involves selecting services in accordance with these factors, including matching treatment type to offender and matching style and methods of communication with the offender's stage of change readiness. (Guerra, 1995; Miller & Rollnick, 1991; Gordon, 1970; Williams, et al, 1995)

**Dosage:** Plans developed will structure 40-70% of a youthful offender's time. Providing appropriate doses of services, pro-social structure, and supervision is a strategic application of resources. Higher risk offenders require significantly more initial structure and services than lower risk offenders. Certain offender subpopulations (e.g., severely mentally ill, chronic dual diagnosed, etc.) commonly require strategic, extensive, and extended services. However, too often individuals within these subpopulations are neither explicitly identified nor provided a coordinated package of supervision/services. The evidence indicates that incomplete or uncoordinated approaches can have negative effects, often wasting resources. (Palmer, 1995; Gendreau & Goggin, 1995; Steadman, 1995; Silverman, et al, 2000) These subpopulations will be identified at Reception and placed in specialized treatment units to ensure their needs are addressed.

**Treatment:** Treatment will be integrated into the Core Program Model. Treatment, particularly cognitive-behavioral types, will be applied as an integral part of the Core Program Model through assertive case management (taking a proactive and strategic approach to supervision and case planning). Delivering targeted and timely treatment interventions will provide the greatest long-term benefit to the community, the victim, and the offender. (Palmer, 1995; Clear, 1981; Taxman & Byrne, 2001; Currie, 1998; Petersilia, 1997, 2002, Andrews & Bonta, 1998)

Staff will be trained and coached to relate to offenders in interpersonally sensitive and constructive ways to enhance intrinsic motivation in offenders. Behavioral change is an inside job; for lasting change to occur, a level of intrinsic motivation is needed. Motivation to change is dynamic and the probability that change may occur is strongly influenced by interpersonal interactions, such as those with counselors, treatment providers, and other institution staff. Feelings of ambivalence that usually accompany change can be explored through motivational interviewing, a style and method of communication used to help people overcome their ambivalence regarding behavior changes. Research strongly suggests that motivational interviewing techniques, rather than persuasion tactics, effectively enhance motivation for initiating and maintaining behavior changes. (Miller & Rollnick, 2002; Miller & Mount, 2001; Harper & Hardy, 2000; Ginsburg, et al, 2002; Ryan & Deci, 2000)

Over the last two decades researchers have looked closely at “style” and how best to influence change. Miller and Rollnick (1991; 2001) used information from the research to develop a Motivational Interviewing approach that serves to enhance motivation among high-risk clients and to increase the likelihood of long-term success. Recognizing that not all youth who are assigned to rehabilitation/treatment units will arrive ready and willing to address the risk factors in their offense cycle, an array of rehabilitation/treatment interventions will need to be developed that are appropriate for the specific youth’s readiness for change. Staff will be trained to identify the youth’s Stage of Change (Prochaska and DiClemente), and use motivational interviewing and enhancement techniques to assist the youth in recognizing how specific criminogenic factors are barriers to achieving goals. Specific target intervention strategies and change skills will be developed with the youth and the treatment team, to address criminogenic factors and move youth closer to achieving their short/long term goals.

Case Managers will be responsible for completing the risk/needs assessment/reassessment, developing the ICAP, and monitoring a youthful offender’s progress. Accurate and detailed documentation of case information, along with a formal and valid mechanism for measuring outcomes, is the foundation of evidence-based practice. DJJ will routinely assess offender change in cognitive and skill development, and evaluate offender recidivism, to ensure services remain effective.

In addition to routinely measuring and documenting offender change, staff performance will also be regularly assessed. Staff who are periodically evaluated for performance achieve greater fidelity to program design, service delivery principles, and outcomes. Staff whose performance is not consistently monitored, measured, and subsequently reinforced work less cohesively, are more frequently at cross-purposes and provide less support to the agency mission. (Henggeler et al, 1997; Milhalic & Irwin, 2003; Miller, 1988; Meyers et al, 1995; Azrin, 1982; Meyers, 2002; Hanson & Harris, 1998; Waltz et al, 1993; Hogue et al, 1998; Miller & Mount, 2001; Gendreau et al, 1996; Dilulio, 1993)

The Case Manager will facilitate the multi-disciplinary treatment team and will be responsible for coordinating and prioritizing interventions and documenting them in the ICAP as well as communicating with parents, guardians, parole officers etc.. Case Managers will also provide individual and/or group counseling on the journaling program.

### Normative Culture

Beginning in the short term (through a phased-in implementation), YCCs' responsibilities will center on providing direct interaction/supervision, behavior management, and maintaining a “normative culture” on their unit. YCCs will continue to be an integral part of ongoing case conferences and will provide input for case reports, but Case Managers will be responsible for managing ICAPs.

In the January 31 Stipulated Agreement, DJJ committed to establishing a “normative culture” within its facilities. A normative culture creates a rehabilitative/treatment environment, within as normalized a setting as possible that recognizes the importance of establishing social rules and expectations centered on respect for the individual, the community, and the program.

The kinds of “norms” that will be accepted and adhered to in DJJ’s normative culture include: non-violent resolution of disputes, respect for divergent points of view, constructive communication both to promote positive norms and to confront norm violations, accepting responsibility for one’s behavior, recognizing that individual behavior has an impact on the group, and group processes to repair the harm caused. Everyone in the community, including youth, staff, and volunteers, will be expected to model and adhere to the “norms” and will be held accountable by the group.

Group process is central to the normative culture. YCCs will conduct a minimum of two large group meetings daily, creating a pro-social culture that is supportive of treatment/behavior change and motivate youth to take responsibility for their actions and recognize the impact of their actions on the community.

DJJ will consult with outside providers for on-the-job training/coaching for YCCs, starting in the Phase I units, to assist them in learning how to develop and maintain a normative culture, as well as how to integrate the normative culture practices with other interventions/approaches in the Core Rehabilitation/Treatment Program.

### Rehabilitation/Treatment Program Development and Delivery

Beginning in the immediate term, DJJ will consult with the court experts and other nationally recognized experts to assist in design, development and implementation of additional rehabilitation/treatment interventions, specifically in the areas of violence reduction, gang integration, substance abuse/dependence, normative culture and interventions designed specifically to meet the needs of female offenders.

For example, according to nationally recognized juvenile justice expert, Peter Greenwood, the following factors/approaches have been associated with more effective programs for youth in custodial settings: programs that focus on higher-risk youth, where the opportunity for improvement is largest; programs that focus on dynamic risk factors, such as drug use or negative peer relationships, that are directly associated with criminal behavior, and can be changed; programs that use treatment methods that are appropriate and tailored for the target individuals; programs that use proven methods of intervention; programs with longer duration of treatment which has been shown to be more effective than shorter treatments; programs that are well established; treatment programs that are administered by mental health professionals – these

have been shown to be more effective than similar programs administered by regular correctional staff. (Greenwood, 2005)

As these rehabilitation/treatment interventions are developed, designated treatment staff and/or treatment providers will provide youth a minimum of 10 hours of rehabilitation/treatment per week, including small group sessions. Designated hours may be increased on units housing offenders with higher risk levels and/or higher intensive needs.

In the short-term, the Core Rehabilitation/Treatment Program will be based on the existing interactive journaling program, which will be enhanced with additional workbooks, offering an Intensive Needs Curriculum. The Department is working in conjunction with “The Change Companies” to begin development of these intensive program enhancements. The Intensive Needs Curriculum will include gender specific workbooks which target problematic issues that require a more intensive approach to bring about needed behavioral change. The format will be similar to the current journaling program in that much of the work will be completed outside of the small group process. However, youth will be provided dedicated time weekly to work on the journaling exercises, with assistance from the Case Manager. In addition to completing the workbooks, youth will be assigned (in the ICAP) specific activities, relevant to the topics in the workbook related to their offense cycle, which will provide opportunities to practice skills learned, discuss ongoing challenges, and receive feedback.

The new risk/needs assessment process will be a primary factor in determining which youthful offenders will be assigned the Intensive Needs Curriculum and which workbooks and activities will be appropriate to address areas of on-going risk/need. The goals of the rehabilitation/treatment interventions will be clearly spelled out in the youthful offender’s ICAP. Progress or lack of progress will be monitored at each case conference. The Intensive Needs Curriculum can be run concurrently with the Basic Core Journals or may begin at the conclusion of the Basic Core Journals, depending on the time the youth has available, and his/her needs. Topic areas in the Intensive Needs Curriculum are: Anger Management, Criminal Thinking and Behavior, Parenting, Exiting Gangs, Victim Empathy (almost completed), Coping with Trauma, and Alternatives to Violence. The Change Companies is developing a separate set of workbooks which will include interactive activities for the female offenders that take into account their unique needs.

YCCs will provide 2-5 hours weekly of small and large group sessions. Case Managers will provide a minimum of 1 hour of group/individual journaling per week, as well as weekly ICAP meetings and monthly treatment team meetings. Psychologists and treatment providers will provide individual rehabilitation/treatment services utilizing evidence based practices.

Below is an example of the different interventions that will be provided as the model is phased in.

TYPE OF INTERVENTION	HIGHER RISK UNIT	LOWER RISK UNIT
<b><u>Large Group</u></b> – Led by YCC. Unit check-in. Review plan for the day. Discuss any concerns/issues.	Weekday mornings – 15 minutes	Weekday mornings – 15 minutes
<b><u>Treatment Group</u></b> – Led by Treatment Provider. Focus is on main risk issues and their relationship to the offense pattern. Youth will explore and identify realistic, pro-social means of having their needs met. Youth will document their offense cycle, determine the triggers, thoughts, feelings, beliefs, and behaviors that support the cycle, and will identify thoughts, feelings, behaviors and attitudes to interrupt the cycle. Youth will develop a relapse plan.	3 x per week – 1 hour	2 x per week – 1 hour
<b><u>Journal Group</u></b> – Led by the Case Manager. Provides opportunity for youth to spend focused time on journaling. Case Manager will lead group discussions during a portion of the time, and will be available to assist youth individually the remainder of the time.	1 x per week 15 minutes group discussion 45 minutes individual time	1 x per week 15 minutes group discussion 45 minutes individual time
<b><u>Resource Group</u></b> – Led by the Psychologist or Treatment Provider. The group will focus on issues specific to the unit population. It may include abuse/neglect, grief, parenting, etc. Recommendations for topics will be provided by the treatment team or developed based on Psychologist/Treatment Provider knowledge of youth issues. The group should be approved by the Program Administrator/Manager.	2 x per month – 1 hour	1 x per month – 1 hour
<b><u>Volunteer Group</u></b> – Led by outside providers. This can include topics such as AA/NA. These groups should be approved by the Program Manager. The Treatment Team, with input from the youth, will recommend the groups needed. The Volunteer Coordinator will schedule the groups.	4 x per month – 1 hour	2 x per month – 1 hour
<b><u>Treatment Team</u></b> - Led by Case Manager. Attendees will also include YCC, youth, education representative, and Psychologist/Treatment Provider, TTS/SYCC, Parole Agent, family and medical staff, as necessary, depending on issues being discussed. The team will review the positive behavioral reports, discuss progress in weekly behavioral goals and weekly ICAP objectives, modify the plan as needed, and set the incentive level.	1 x per month 30 minutes	1 x per month 30 minutes
<b><u>Individual Counseling</u></b> – Case Manager will meet with the youth weekly to review the progress of ICAP objectives and set new objectives as needed.	1 x per week – 15 minutes	2 x per month – 15 minutes
<b><u>Individual Counseling</u></b> – YCC will meet with the	1 x per week –	1 x per week –

youth weekly to review behavioral progress, set daily or weekly behavioral goals.	15 minutes	15 minutes
<b><u>Individual Counseling</u></b> – Psychologist/Treatment Provider	As needed – Time slot to be scheduled. Youth will be signed up through Case Manager.	As needed – Time slot to be scheduled. Youth will be signed up through Case Manager.
<b><u>Special Meetings</u></b> – Based on behavior issues, a special meeting may be called by any member of the treatment team. When requesting the meeting, the behavior to be discussed, along with the recommended outcome and the persons recommended to be included in the meeting, if any, in addition to the treatment team, should be clearly identified.	As needed. This could include removal to the intensive behavior modification unit.	As needed. This could include removal to the intensive behavior modification unit. This could include movement from a dorm-style room assignment to a single room unit.
<b><u>Large Group</u></b> – Led by the YCC. Debrief the day. Discuss any behavioral issues for the unit and the status regarding weekly unit goals. Review the positive behavioral slips for the day and assign extra incentives for that evening (i.e. later bed time), as appropriate.	Weekday evenings – 45 minutes	Weekday evenings – 45 minutes
<b><u>Large Group</u></b> – YCCs and youth will review unit goals from the past week. YCCs will facilitate discussion about progress. Group will brainstorm strategies for improvement if goals not met. Goals for the following week will be set and group will decide how successes will be celebrated.	Every Saturday – 1 hour	Every Saturday - 1 hour
<b><u>Large Group</u></b> – YCCs and youth will celebrate weekly goal progress.	Every Sunday – 2 hours	Every Sunday - 2 hours
<b><u>Reassessment Meeting</u></b> – The Treatment Team will meet to reassess the dynamic risk/needs assessment. This will take the place of the Treatment Team meeting scheduled for the month.	Every 90 days 30 minutes	Every 120 days 15-30 minutes
<b><u>Family Treatment</u></b> – The Psychologist, Treatment Provider or Case Manager/Parole Agent can facilitate rehabilitation/treatment related activities/interventions with the youth and their families. Families will be invited to provide input as to incentives for family participation – i.e. longer visiting time, extra visiting on a non-regular visiting day, extra phone calls, etc.	As needed	As needed

### Training

DJJ staff will be trained as trainers for the Strategies for Juvenile Supervision/Client Management Classification, risk/needs assessment, motivational interviewing and ICAP development, to provide in-house expertise and to create long-term sustainability. These trainers will also provide on-going quality assurance and technical support to living unit and treatment staff.

Staff will be provided training on Stages of Change and Motivational Interviewing, to enhance their assessment skills, and will be provided skills in matching interventions with the offender's level of motivation. Psychologists will be available to provide individual treatment and/or to provide clinical oversight/guidance as needed. Staff will be available to provide individual treatment to supplement group rehabilitation/treatment offered on the living units and/or to provide continued treatment for youth who complete rehabilitation/treatment programs and have ongoing needs that may be better served on an individual basis. For example, if a youth completes the residential sexual behavior treatment and transitions to a lower risk unit with non-sexual offenders, specific offense related treatment may be best addressed individually.

Consultants/subject matter experts will provide skill training with directed practice. DJJ will work with consultants to ensure interventions provide evidence-based programming that emphasizes cognitive-behavioral strategies and is delivered by well trained staff.

To successfully deliver this treatment to offenders, staff will be trained to understand antisocial thinking, social learning, and appropriate communication techniques. Skills will not just be taught to the offender, but will be practiced or role-played and the resulting pro-social attitudes and behaviors will be positively reinforced by staff. DJJ will focus on implementing programs that have been scientifically proven to reduce recidivism. (Mihalic, et al, 2001; Satchel, 2001; Miller & Rollnick, 2002; Lipton, et al, 2000; Lipsey, 1993; McGuire, 2001, 2002; Aos, 2002)

### Program Oversight

Administrators at headquarters will direct/oversee the development and implementation of rehabilitation/treatment programs across the state and managers at each facility will be responsible for implementation adherence and fidelity.

### Reduce Living Unit Size

Living unit sizes will be reduced, beginning in the Phase I units to no more than 38 in dorm-style units, no more than 36 in single room units, and no more than 24 in Behavior Treatment Programs.<sup>5</sup> Most of the Phase I units will be created by staffing and opening units that are currently closed, and transferring youth from existing units. This will result in lowering populations on Phase I and many non-Phase I units as well.

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<sup>5</sup> DJJ's determination of maximum living unit sizes was based on two factors: 1) existing facility constraints and capacity and 2) a 1980 study on CYA's population, recommended by the court expert, which demonstrated less violent and more positive behavior, fewer time adds and more time cuts, improved social climate, and less need for staff controls in units with living unit size of 38. (*The Institutional Violence Reduction Project: The Impact of Changes in Living Unit Size and Staffing*, 1980)

### Strategies for Juvenile Supervision/Client Management Classification

DJJ will phase in implementation of Strategies for Juvenile Supervision (SJS) (a copyrighted tool) and Client Management Classification (CMC), to objectively assess and identify strategies to use with specific youthful offenders, for proactive behavior and case management. YCCs, Case Managers, and other facility staff will be trained on these strategies and provided skills to utilize the most effective strategies with the youth they supervise.

### Female Offenders

Given the small numbers of female offenders and their specialized needs, DJJ will issue a Letter of Interest to determine the availability of services/providers statewide to address the needs of female offenders who are committed to DJJ. Based on this information and contingent upon necessary approval, DJJ will consult with a team of experts, including outside consultants, to develop and issue a Request for Proposals to provide services for female offenders in secure placements outside of DJJ's facilities. Given the likelihood that DJJ will be unable to identify appropriate providers for all female offenders, and that contracting for services will be a lengthy process, DJJ will also consult with expert(s) in female offenders to assist in developing gender responsive guiding principles, policies and practices and to assess and target risk factors and develop interventions that are responsive to the needs of the female offender population.

### Immediate:

- Eliminate the concept of “general population” and implement a Core Rehabilitation/Treatment Program philosophy that emphasizes a normative culture and confirms that comprehensive skill based rehabilitation/treatment will be provided to every youthful offender, except in circumstances where an individual's mental health needs prevent their ability to benefit from the Core Rehabilitation/Treatment Program.
- Appoint a Director of Juvenile Programs to oversee program development and implementation.
- Consult with experts to identify/develop/implement strategies and programs targeted at reducing violence.
- Consult with experts to assist in developing strategies to improve the core program model, which may include conducting surveys of youth and staff regarding existing program strengths and needs, conducting forums at institutions across the state with staff, youth, and families to inform the development of the long-term core program model and to generate support and understanding for the transition to this model.
- See the Assessment/Classification, and Placement section for information addressing the need to acquire a risk/needs assessment that will determine risk to re-offend and in doing so, will provide a quantitative measure of change related to risk, protective factors, and skills related to re-offending as well as provide a measure for rehabilitation/treatment effectiveness.
- Develop Intensive Needs Curriculum and integrated activities for the Interactive Journaling Program.
- Issue a Letter of Interest to identify potential service providers to serve the female population (outside of DJJ facilities).
- DJJ will identify interim program space for rehabilitation/treatment groups. For example, DJJ will develop a schedule to use available education classrooms in the afternoons and evening, where appropriate.



#### Phase I:

- Continue reducing living unit size through a phased-in implementation approach.
- Phase in additional staffing to ensure that youth are able to spend waking hours outside of their rooms in safe, productive, pro-social activities, except in cases of emergency, when youth are on “time out” (see Behavior Treatment Program) or when youth are sick.
- DJJ will identify consultants to provide training and coaching to YCCs to assist them in creating a “normative culture” environment, in which restorative justice principles are used to establish social rules and expectations centered on respect for the individual, the community and for taking responsibility for harm caused, enforcing the positive culture on a daily basis (am and pm) through group unit meetings, staff mentoring, schedule of recreation/activities, including intramural sports and community service projects, etc.
- Implement Strategies for Juvenile Supervision (SJS is a copyrighted tool) and Client Management Classification (CMC), to objectively assess and identify strategies to use with youth, for proactive behavior and case management.
- Train a select number staff to become trainers in SJS/CMC behavior and case management strategies, to develop in-house expertise and ensure ongoing successful implementation.
- Provide a minimum of 10 hours of rehabilitation/treatment per week, including 2-5 hours of small group sessions, individual counseling, and 1 hour of group/individual journaling time.
- Increase the availability of community-based groups providing services to youth on the living units and in preparation for re-entry.
- Consult with expert consultant(s) in female offenders to assist in identifying appropriate services and with developing gender responsive assessment and interventions to meet the needs of the female population.
- Ensure that psychological and psychiatric services are accessible and available for offenders in core rehabilitation/treatment programs and other non-intensive mental health treatment units.
- DJJ will provide psychological and psychiatric services, as needed, for offenders with the co-occurring disorders of substance abuse and mental illness.
- DJJ will identify appropriate admission criteria for higher risk, intensive needs programs (substance dependence, violence reduction, etc) based on risk/needs assessment, placement options, and compatibility with core rehabilitation/treatment program.
- DJJ will consult with experts to determine criteria if additional assessments are needed to distinguish between substance abuse and dependence so that specialized treatment beds can be effectively targeted to identified offenders.
- DJJ will consult with experts to develop interventions to address different levels of motivation and learning styles.

#### Phase II:

- Use reduction in risk to re-offend as part of the exit criteria from higher risk units and as a measure of effectiveness for rehabilitation/treatment programs.
- Use the risk/needs assessment as a basis for developing the Individual Change and Accountability Plans, which will be monitored daily, updated weekly with the youth, communicated regularly to parents and guardians and modified as necessary based on monthly treatment team meetings and reassessments.

- Develop interventions specifically for reducing the risk of violent re-offending; long-term substance abuse/dependence; and gender-specific programming, as needed.
- Determine the effectiveness of existing programs, including their adherence to evidence-based principles and create a process for improving interventions.
- Identify the intervention needs of DJJ's population based on the new risk/needs assessment and match this with information regarding the effectiveness of existing programs to guide future program development.
- Identify and develop short-term interventions to address the specific risks/needs of parole violators (relapse plans, domestic violence, substance abuse, etc.)
- Consult with experts to develop transition/re-entry interventions to be provided before youth are released. (Beginning in the short-term.)
- Change substance abuse treatment from gate to entry programming and expand program capacity to meet the needs of the population.
- Consult with experts to develop curriculum for youth who need less intensive interventions.
- Implement a comprehensive Quality Assurance program to monitor program implementation.

Long Term:

- Continue implementation and ongoing modification of rehabilitation/treatment developed in conjunction with national experts.

## PROGRAMS FOR HIGH SCHOOL GRADUATES

### **Current System**

#### College Courses

There is no mandated post secondary education for high school graduates. However, post secondary education opportunities are available at all institutions. Students complete placement exams prior to admission to classes. There are currently 120 high school graduates enrolled, not considering the fall 2005 enrollment numbers. Distance Learning Programs/correspondence courses are also available at each institution (Global classrooms).

#### Vocational Programs for High School Graduates

Vocational programs are part of DJJ's K-12 High School (HS) System. Two hundred (200) credits are needed to graduate, including 60 elective credits. Non-high school graduates usually achieve electives through vocational programs. Graduates are accepted into vocational programs only as space permits or to the extent vocational programs are community college or grant funded. Currently there are 158 graduates enrolled.

#### Free Venture

The Free Venture Program (FVP) is a partnership between the public sector and private industry. The private-sector industry sets up and operates its business within the confines of a correctional facility and hires the youthful offenders as its employees. The youthful offenders receive training for meaningful jobs, which aids in their successful community placement. Additional benefits of the program include the facts that it enables financial assistance to victims of crime and helps to reduce institutional costs. Currently there are 34 youth participating at five (5) DJJ Free Venture sites.

Youth eligible for the Free Venture Program must have a high school diploma; no "1800" cases (cases in which the Court has extended the jurisdiction for an additional 2 years, if the offender is deemed physically dangerous to the public based on mental or physical deficiency, disorder or abnormality); no behavior problems within the last 60-90 days; and either US citizenship or a Green Card. The various companies have additional criteria depending upon their workforce needs, such as computer and keyboard literacy, English speakers, etc. Once the youth is approved by the Unit Supervisor, Gang Coordinator and Free Venture Coordinator, the company interviews, hires and supervises the offender.

#### Work Crew

Site Superintendents can hire high school graduates into work crew positions in areas such as maintenance, grounds keeping, etc.

### **Challenges/Problems with the Current System**

DJJ is not funded for vocational programs for high school graduates, nor are there adequate space and instructors for graduate vocational shops. As a result, there are not enough vocational programs to meet the needs of the high school graduates. A total of 1050 students are enrolled in vocational education, but these include only 158 of the 641 high school graduates. The monthly

reports related to vocational programs do not show which vocational students are high school graduates, so a manual tally is completed when and if that information is needed.

NOTE: Vocational programs are not the only option for graduates. High school graduates are also enrolled in college programs and work crews, but there is currently little interest among students to obtain BAs or AAs and the current data management system does not effectively track college programs.

Only one Vocational Specialist position exists to serve the entire youth population by providing vocational and career counseling and assisting with connections to parole and community transition to employment. The result is that little career counseling and community transition is being accomplished.

There is no career-vocational assessment and no career-vocational interest inventory given to students to determine their career-vocational interests and aptitudes. Currently, vocational programs are not a central part of the Education Branch or any other element of the organizational construct.

While Prop. 98 funds high school vocational programs, the funding/availability of programs for high school graduates is limited to the following:

- As space permits, high school graduates are allowed to enroll in vocational programs targeted for K-12
- Some programs are funded through the General Fund
- A Federal Department of Labor grant funds a career-to-work grant at N.A. Chaderjian DJJ is hoping to extend the grant to two additional locations at DeWitt Nelson.

There has been no formal evaluation of the Free Venture Program (FVP). The FVP has no dedicated staff positions, and, although there is one Free Venture Coordinator (Program Administrator level) designated at each institution, that person's duties related to the FVP must be balanced with other full time duties. The headquarters FVP Coordinator is also not a dedicated position. As a result, additional companies have not been actively recruited and those currently working with DJJ are not provided adequate service. Because of staffing issues, monthly reports on youthful offenders' progress, parole consideration dates, etc. are no longer shared with the youthful offender's Parole Agent to assist in parole re-entry.

There are no standardized eligibility criteria for work crews. Superintendents at each facility decide who is eligible.

### **Proposed Changes**

DJJ will develop a strategy to improve access to college courses, vocational programs, FVP, and work crews for high school graduates and to incorporate these components into the Individual Change and Accountability Plans (ICAP) for each youthful offender, as appropriate.

### Immediate:

#### College Programs:

- Improve attitudes toward earning college diplomas. Survey students with high school diplomas and those working on high school diplomas to identify attitudes toward earning a college diploma. DJJ will use incentives to encourage graduates to take college classes, either on site, or through correspondence.

#### Vocational Programs for high school graduates:

- The administrator responsible for career-technical education (CTE) will conduct annual career-technical job studies to determine the effectiveness of the CTE programs. The results of the studies will be used to modify and/or strengthen the career-technical programs that are provided.
- DJJ will begin implementation of a vocational assessment tool, the Holland Vocational Aptitude/Interest, that was recently purchased.

### Phase I:

#### College Programs:

- It is important that DJJ address weaknesses in data management. Efforts will be initiated to modify monthly reports so they indicate, among other things, in which programs students are enrolled, by DJJ site.
- DJJ will form an advisory group comprised of representatives from DJJ's Education staff, community college administrators, and the Employment Development Department to collaborate on providing quality career-vocational programs.

#### Vocational Programs for high school graduates:

- DJJ will address weaknesses in data management, including modifying monthly reports to indicate the number of graduates enrolled in vocational programs, by DJJ site.
- Night vocational classes for graduates will be implemented to take advantage of existing facilities, space and materials. DJJ will establish links to community colleges to certify instructors so students would be able to earn college credits for these vocational classes.

#### Free Venture Program:

- Evaluate the Free Venture Program.

#### Work Crews:

- Establish standardized eligibility criteria for work crews.

#### General:

- DJJ will clearly designate that organizational responsibility for programs for graduates resides in the Education Branch. Vocational program staff will report through the Education Branch, whose mission will be broadened to include vocational programs as well as educational programs for high school graduates.

### Phase II:

- Experts will be consulted to help DJJ develop strategies and processes to ensure career goals are adequately addressed in each offender's ICAP.
- Establish objective criteria will be crafted for vocational training and jobs, based on risk, needs, responsiveness, and behavior.

## RE-ENTRY PLANNING

### **Current System**

Currently, re-entry planning typically begins 45 days prior to a youth's release to the community. The process provides minimal opportunities for family, community and/or victim input. The process involves a Referral to Parole Case Report being sent to the parole office to investigate the recommended placement and required notifications being sent to the victims and/or next of kin, the committing court and local law enforcement at least 30 days before a hearing is held.

The parole agent reviews and discusses the Parole Case Report with institution staff and investigates appropriateness of the recommended placement. For specialized caseloads (i.e. mental health and sexual offender), the parole agent may begin re-entry planning with institution staff, the offender and his/her family at least six months prior to consideration of parole. Local law enforcement is alerted regarding the offender's pending release and Individualized Parole Placement Plans are prepared to identify special conditions of parole, victim/community concerns (if any) and expectations in the areas of treatment, education, employment and restitution obligations. Coordination between DJJ institutions and the field parole offices can be fragmented and inconsistent.

In most cases, parolees are assigned to Intensive Re-entry Caseloads upon release to the community. Intensive re-entry is designed to increase public protection by early detection and prevention of parole violations, and to provide maximum services during the most critical period, the transition from institutional to community living. Caseload ratios are 1:15. Each parole unit provides intensive re-entry services, in areas where it is geographically feasible. This program averages 90 days in duration, and is dependent upon the service needs of the wards released to parole. Intensive re-entry services include two contacts per week for the first 30 days and weekly contacts for the duration of the re-entry period. Also included is twice monthly substance abuse testing as designated by Board of Parole Hearings, employment/education/job training assistance, individual and group counseling, subsidized placement, and other services deemed necessary.

### **Victim Safety Concerns**

Thirty (30) days prior to an offender's consideration for parole, if they have requested such notification victims/survivors are notified in writing of the recommendation for parole and advised of their rights to attend the hearing and/or submit an impact statement. If the victim cannot or wishes not to attend the hearing, the institution/Office of Victim and Survivor Services (OVSS) will ensure that victim impact statements, safety concerns, requests for "no contact" or enforcement of stay away or restraining orders are presented to the Parole Board and Parole Office. If the youth is paroled, victims/survivors are advised in writing (upon request) of the date of release and notified which parole office is responsible for supervising the parolee.

In high public interest cases, cases involving significant victim concerns (i.e. sex offenses), and at the victim's request, OVSS staff will work with the victim(s) and provide personal assistance and support such as transporting to and accompanying victims at parole hearings and providing resource referrals for additional services in the community, including information on obtaining

restraining orders, arranging for translation services, liaison with institution and parole office staff and telephone notifications.

### Pre-Release Transition

There is only one Pre-Parole Transition program offered at DJJ. The program is offered at El Paso de Robles Youth Correctional Facility, for youth within six months of release to the community.

### Challenges/Problems with the Current System

There is no formal process to adequately address re-entry planning and to provide opportunities for family, community and victim input. Re-entry planning begins much too late in the offender's program, typically 45 days prior to his/her release to the community. There is only one Pre-Parole Transition program.

Crime victims are often not provided with sensitive and responsive services since these functions are often assigned as a secondary assignment to a Parole Agent III or other designated staff.

### Proposed Changes

DJJ will increase opportunities for regular and ongoing communication between institution and parole staff and will begin re-entry planning immediately upon a youth's arrival at the Reception Center. Planning will continue throughout an offender's stay in DJJ as well as during transition and stabilization in the community. The rationale for doing so is two-fold. The first is the recognition of the importance to begin addressing reentry issues when an offender is *first* committed to a period of incarceration. The second involves the necessary focus upon the "pre-entry" identification and addressing of needs of offenders and their families, their victims and the communities to which they will eventually return (Gregorie et al., 2002).

The Individual Change Accountability Plan (ICAP) will include a specific section to address re-entry preparation in the areas of education, vocational training, employability preparation, substance abuse, mental health and/or sex offender counseling, housing and placement arrangements. In addition, parole staff, the family, crime victims/survivors, and community organizations will be included in the re-entry planning process as appropriate.

With these changes, a more seamless system will be created between institutional placement and community supervision. Prerelease and preparatory planning will begin at the onset of an offender's arrival at the Reception Center and will continue through institutional placement, the re-entry/transition period and into the community. Prerelease planning procedures will be incorporated to ensure that necessary documents are secured (birth certificate, driver's license/identification card, social security number, Medicare, INS) prior to an offender's release. This will assist in expediting access to social services and securing employment in the community.

Re-Entry staff will assist youth in engaging ongoing support from their communities and will actively seek pro-social supports for offenders in their communities. Research indicates that

many successful interventions with high need populations (e.g., inner city substance abusers, homeless and/or dually diagnosed youth) actively recruit and use family members, spouses, and supportive others in the offender's immediate environment to positively reinforce desired new behaviors. This Community Reinforcement Approach (CRA) has been found effective in addressing a variety of behaviors, such as unemployment, alcoholism, substance abuse, and marital conflicts. Relatively recent research additionally indicates the efficacy in addressing these problem behaviors of twelve step programs, religious activities, and restorative justice initiatives that are geared towards improving bonds and ties to pro-social community members. (Azrin, & Besalel, 1980; Emrick et al, 1993; Higgins & Silverman, 1999; Meyers & Smith, 1997)

#### Immediate:

- DJJ will initiate Community Assessment Reports (CARs) on all new DJJ commitments. The CAR includes personal contact by the parole agent with the parents or other close relatives who are of significance in the offender's life. It also includes contacts and interviews with other people in the community who can provide significant information regarding the offender. The primary purpose is to make personal contact with the family, community and the crime victim to verify the accuracy of the material received from the county and to gather significant additional information regarding the offender. A secondary purpose is to establish a relationship with the family, and begin to involve them in planning for the offender's future and eventual release to the community. The information in this report aids in decision making for the offender regarding institutional and parole programming.

#### Phase I:

- DJJ will establish Re-Entry Specialist positions who will serve as liaisons to the institutions, parole offices, other agencies, systems and organizations to ensure that youthful offenders and their families are provided needed services in the community and to improve youthful offender transition to the community in the areas of education, employment, substance abuse, mental health, housing and required subsistence needs. The Re-Entry Specialist will begin working with the youthful offender and family at the time of commitment. Referrals will be made to other agencies and will be monitored to ensure services are accessed and appropriate to the youthful offender's needs. The primary focus of the positions will be to assist youthful offenders and families in the successful reentry of offenders back to their communities. The Re-Entry Specialist will work both within the facility and in the community to develop linkages with local service systems to leverage additional resources for youthful offenders once they are placed in the community.
- Parole offices will be provided access to the Ward Information Network (WIN) to allow staff to access and exchange information on offenders much sooner. This will allow for information sharing between institution and parole staff for re-entry and transition planning. On parole violator cases, the field parole agent will be able to input critical information about violation behaviors, revocation proceedings, community supervision issues, victim safety concerns, and identified risks/needs. This improved communication will improve the institution's ability to modify the violator's treatment plan accordingly.



- DJJ will consult with experts to establish re-entry programs/step-down units at each facility to better prepare youthful offenders for return to their communities. Re-entry units will incorporate additional elements of the Core Rehabilitation/Treatment Program. Some will be units for parole violators, addressing the specific treatment needs of this shorter-term population.
- Each youthful offender will have a Re-Entry Plan, incorporated into the ICAP, which includes victim and family input. To most effectively develop plans directed at preventing future crime and victimization, it is important to identify the patterns of an offender's past criminal behavior as well as the context for and nature of the harm caused to victims. Such knowledge can be derived from victims' and family members' accounts of the criminal events and precursor behaviors. Incorporating family and victim input into the re-entry or transition plan will inform concrete ways to deal with identified risk factors, as well as strategies to enhance protective factors.
- DJJ will establish dedicated Victims Services Restitution Specialists (VSRS) to ensure timely notification to victims/survivors and provide sensitive and responsive services. The VSRS will serve as liaisons to crime victims, ensure DJJ compliance with legal mandates and monitor all victim related policies, procedures and services within DJJ institutions. Pursuant to the Victims Bill of Rights, California Constitution Article I, 28, WIC 656.2, victims are entitled to be informed about their rights to notification and restitution as well as the right to submit an impact statement for inclusion in the social study section of the probation report submitted to the court. In many of the cases that are committed to the DJJ, probation departments have not contacted victims to inform them of their rights, restitution is not ordered and victims are not included in the criminal justice process. Approximately 75% of DJJ commitments have no direct orders of restitution to victims and 25% of the cases that have the victim/survivor names have no addresses for those individuals. The VSRS will work to ensure that victim input and restitution information is available to incorporate in the ICAP. (See Intake section).

#### Phase II:

- DJJ will incorporate victim notification requirements into WIN. This is required to ensure that DJJ is in compliance with the legal mandate to provide timely victim notification on offender status and release to the community. DJJ institution staff will be able to access "real time" information on victim notification requirements and requests thus preventing the likelihood of missing notification timeframes. This is particularly significant in cases where victims are concerned for their safety. Timely notification to victims allows them to prepare themselves emotionally and physically, and to relocate if necessary, which is particularly significant in cases of "family victims."
- DJJ will begin videoconferencing Initial Case Reviews and subsequent case conferences as needed. This will provide a means for ongoing communication, input and involvement of parole staff and families. Utilizing video conferencing for re-entry multidisciplinary team staffings with the institution, offender, parole staff, family, and community organizations will allow for re-entry planning to begin upon commitment to DJJ and provide a convenient means for regular and ongoing communication.
- DJJ will establish Re-Entry Advisory committees at each parole region. The Re-Entry Advisory committee will assist DJJ with developing community capacity for services. Committee members will include community based organizations, family members,

crime victims and/or organizations representing crime victims, local probation and other law enforcement, social services and an institution, education and parole representative.

- Youthful offenders will be afforded the opportunity to participate in pre-release transition services at least six months prior to their release to the community. Efforts will be made to place DJJ offenders in re-entry units closer to their communities in order to solidify family reunification efforts, involve community providers and formalize re-entry plans. DJJ staff on these units will continue the treatment and training efforts initiated in the Core Rehabilitation/Treatment Program and assist offenders in developing strong work ethics and good work habits, along with essential skills needed for daily living and life coping skills. Individual, large and small group counseling and pre-parole presentations from community parole agents and community service providers will be provided. In addition, in person pre-parole contact with the offender will be conducted by the assigned field parole agent to begin transition services.

## Addressing Behavior Problems

## BEHAVIOR TREATMENT PROGRAMS

### **Current System**

At present, living unit staff and treatment teams make recommendations to the facility's Juvenile Justice Administrative Committee (JJAC) for placement in Special Management Programs (SMPs) when it is determined that a youthful offender's behavior meets the established criteria. Youth Correctional Counselors (YCCs), teachers and specialists assigned or redirected to SMPs are responsible for providing counseling, education and available services on the SMP. There are no specific exit criteria for the SMP. When it is determined that youthful offenders will be returning to "general population" living units, there is minimal or no formal transition process or program.

Temporary Detention (TD) is a status in which confinement in secured quarters is imposed upon youthful offenders to ensure the safety of the youthful offender or others or the safety and security of the facility. TD is expected to last only as long as the presenting circumstances warrant.

### **Challenges/Problems with the Current System**

There is inadequate staffing for SMPs, resulting in inadequate counseling, mental health treatment, education, resource groups and unrestricted exercise. In general, services provided to youthful offenders in SMPs are not specific to their individual rehabilitation/treatment needs. For the most part, SMPs are used to safely manage the remaining population, not to address the behavior of the youth in the SMP program.

Not every facility has an SMP or similar TD space. As a result, the use of SMP and/or TD varies depending on the available options.

Automatic segregation by gang affiliation at some facilities has resulted in populations that can be extremely difficult to program. Gang Intervention programs are limited and primarily include outside speakers coming in to make presentations, not intensive interventions.

Levels of violence remain too high, which has a significant impact on both staff and youthful offenders' safety and in many cases prevents effective programming.

### **Proposed Changes**

Beginning immediately, DJJ will move towards safer and more secure facilities by assessing the current population, with objective criteria related to violent/disruptive in-custody behavior. In consultation with experts, DJJ will begin developing strategies and programs for violently disruptive youthful offenders. (See Core Rehabilitation/Treatment Program/Safe and Secure Facilities section.)

### Behavior Treatment Programs

DJJ will begin phasing out the use of SMPs and replacing them with Behavior Treatment Programs at each facility, except intake and specialized treatment facilities. Unlike SMPs, Behavior Treatment Programs will not be used as a form of punishment, but rather as an intensive behavior treatment intervention.

One or more of the following behaviors within the past 90 days, would make a youthful offender eligible for referral to a BTP:

- Battery on a staff member.
- Battery on a youth with a weapon.
- Serious battery on a youth without a weapon.
- *Acted as an aggressor in a group physical attack.*
- *Acted as an aggressor in a group disturbance.*
- Possession or manufacture of a weapon.
- Criminal offense that resulted in a commitment to CDCR Adult Division.
- Validated as a gang leader and currently involved in the direction, promotion and/or encouragement of violence or is deemed a significant influence in disruption of the facility.

In consultation with nationally recognized experts, DJJ will refine the specific entrance and exit criteria for the BTPs, as well as identify/develop evidence-based program components. Referrals to the BTP will be made to the Classification Administrator. A centralized multi-disciplinary team, chaired by the Classification Administrator, will review referrals to ensure entrance criteria are met and determine whether or not the referral is appropriate.

At least eight hours of rehabilitative services in each 24 hour period will be provided in the BTP. This standard is designed to include 4 hours of education, 2 hours of recreation and 2 hours of rehabilitative/treatment interventions.

The program will be designed to increase positive reinforcement for appropriate behavior. When learning new skills and making behavioral changes, human beings appear to respond better and maintain learned behaviors for longer periods of time, when provided incentives rather than punishment. Behaviorists recommend applying a much higher ratio of positive reinforcements to negative reinforcements. Research indicates that a ratio of four positive to every one negative reinforcement is optimal for promoting behavior changes. These rewards do not have to be applied consistently to be effective (as negative reinforcement does) but can be applied randomly.

Research indicates increasing positive reinforcement should not be done at the expense of, or undermine, administering swift, certain responses for negative and unacceptable behavior. Offenders having problems with responsible self-regulation generally respond positively to reasonable and reliable additional structure and boundaries. Offenders may initially overreact to new demands for accountability, seek to evade detection or consequences, and fail to recognize any personal responsibility. However, with exposure to clear rules that are consistently (and swiftly) enforced with appropriate graduated consequences, offenders and people in general tend to comply in the direction of the most rewards and fewest punishments. This type of extrinsic

motivation can often be useful for beginning the process of behavior change. (Gendreau & Goggin, 1995; Meyers & Smith, 1995; Higgins & Silverman, 1999; Azrin, 1980; Bandura et al, 1963; Bandura, 1996)

Upon a youth's admittance to a BTP, the BTP treatment team, in consultation with the youth's previous treatment team, will modify the youth's Individual Change and Accountability Plan (ICAP). The ICAP will include behavioral objectives specific to the behavior/issues that resulted in the youth's referral to the BTP. Youth must successfully achieve the objectives in the ICAP before transitioning back to the Core Rehabilitation/Treatment Unit. As in the Core Rehabilitation/Treatment Unit, the treatment team (including the youth) will meet to discuss progress and/or barriers and adjust the ICAP accordingly.

Youth admitted into a Behavior Treatment Program will participate in interventions designed to better prepare them to reintegrate back to a Core Rehabilitation/Treatment Program. Components may include, but are not limited to, conflict resolution, anger control, gang interventions, communication skills, and individual and small group counseling. Youth assigned to a Behavior Treatment Program will have access to all mandated services listed below, unless delivery of these services compromises the safety and security of the facility. If it is determined that delivery of services cannot be accomplished in a safe manner, the appropriate manager/administrator will be contacted to identify/approve an alternative program schedule.

- Exercise
- Education
- Counseling
- Telephone calls
- Visiting
- Grievances
- Legal resources
- Religious services
- Mail
- Nutrition
- Clothing
- Bedding
- Hygiene/Hygiene Supplies
- Medical/Dental Services
- Mental Health Services

Once youthful offenders have met the behavioral objectives in the ICAP, they will begin a transition phase. A transition plan for youth who are ready to return to their Core Rehabilitation/Treatment unit will be developed by the treatment team and shall include the following activities:

- Regular visits to the designated home living unit.
- Attending school in the Core Rehabilitation/Treatment Program school area.
- Attending small groups or resource groups on the home living unit.
- Identifying any unresolved gang or transfer issues that may limit a successful transition.
- Signing a contract agreeing not to promote, direct and/or participate in any further violent or disruptive behavior.

In consultation with experts, a process will be developed to ensure youth who meet the exit criteria are transitioned.

If a youthful offender from an open dormitory living unit continues to demonstrate violent/disruptive behavior after placement in a Behavior Treatment Program, staff may recommend to the Classification Administrator that upon leaving the BTP, the youthful offender be transitioned to a single room living unit.

The Ward Information Network will track length of stay and participation in rehabilitation/treatment and education as well as disciplinary actions of youth assigned to Behavior Treatment Programs.

DJJ will review the effectiveness of Behavior Treatment Programs to ensure this approach is adequately addressing the behavioral, mental health and educational needs of the youth referred to BTPs. In the event it is determined that identified youth continue to be violently disruptive and detract from the success of other youth, consideration will be given to establishing an additional program delivering services in a more structured and limiting manner.

#### Temporary Detention

The current use of temporary detention units will be phased out and replaced with “time outs” for up to six hours on assigned living units.

#### Conflict Resolution Teams

Conflict Resolution Teams (CRTs) will be established to pro-actively address behavior management issues and defuse potential conflicts among youthful offenders. Conflict resolution team members will serve as trainers/ongoing support and will model expected behaviors for other staff on conflict resolution, mediation, and other de-escalation techniques. Conflict Resolution Team members will meet with living unit staff and youth placed on a “time out” to assess what steps are needed to return the youth to regular programming. It is important to note (as outlined in the training section), that living unit staff (beginning with Phase I units) will also be provided training in conflict resolution, crisis intervention and SJS and CMC strategies. The Conflict Resolution Teams will be trained first, and will provide assistance to all units, while other staff are in the process of being trained. CRTs will serve as mentors and role models, continuing to reinforce the expected skills.

Conflict Resolution Teams will be responsible to:

- Conduct interviews with youthful offenders to resolve potential conflict as one means of reducing violence.
- Mediate between offenders after incidents of one-on-one or group fights, to determine steps to safely return all youth to regular programming.
- Maintain a presence at the facility and at each living unit, talking with staff and youth, and making themselves regularly available for both formal and informal communication.
- Establish and maintain protocols for debriefing incidents.
- Ensure appropriate tracking of information to assist with identifying trends and reporting outcomes regarding facility related conflicts.

- Establish and maintain information identifying gang affiliation and activities. Submit a monthly report to specified managers/administrators, identifying incidents, trends and interventions.
- Submit a report to the Superintendent and specific managers/administrators within three days of a gang incident requiring a Serious Incident Report. This report will address a brief summary of the incident and specific interventions taken and planned to resolve the conflict.
- Participate in facility community activities reinforcing the pro-social culture.
- Establish and maintain protocols for communicating with headquarters, the superintendent, managers, treatment team and all impacted staff relative to pertinent information, trends and interventions.

Immediate:

- Develop objective criteria for placement in Behavior Treatment Programs.
- Assess the current gang segregation policy and develop a long-term strategy and realistic timeframes to safely eliminate the practice at some facilities of automatic segregation by gang affiliation.
- Develop ongoing gang intelligence and intervention training for all peace officers.
- Expand the use of community organizations in providing gang interventions.

Phase I:

- Phase out Special Management Programs and replace with Behavior Treatment Programs at every facility with the exception of intake and specialized treatment facilities. Some facilities, particularly those that are also phasing out a Temporary Detention unit, may have more than one Behavior Treatment Program.
- Establish living unit size of Behavior Treatment Programs at no more than 24 youthful offenders.
- Train Behavior Treatment Program staff on SJS/CMC strategies as one method for behavior management and violence reduction.
- Phase out Temporary Detention and replace with “time outs” for up to 6 hours on assigned living units.
- Develop Conflict Resolution Teams to assist with and defuse daily conflicts between youthful offenders.

Long Term:

- In the long term, DJJ will develop strategies to safely integrate youthful offenders at all facilities.



## USE OF FORCE

### **Current System**

DJJ's Use of Force Policy is currently being revised. An outline of the revised policy is described below.

### **Challenges/Problems with the Current System**

DJJ's previous Use of Force Policy lacked Title 15 Regulations, was cumbersome and lacked specific guidance for staff. In addition, Use of Force Policy training was not being provided to peace officers annually at all eight facilities.

### **Proposed Changes**

DJJ has been working over the past several months to revise the Use of Force Policy. This revised policy will be implemented as soon as possible.

As DJJ phases in implementation of the Safety and Welfare and other remedial plans, staff will be provided training on verbal de-escalation, conflict resolution, and other interventions on the continuum of force. As a result, DJJ anticipates a reduction in the use of chemical and other physical restraints (See Measurable Outcomes).

#### **Immediate:**

- Implement DJJ's Use of Force Policy and provide annual training to all peace officers.
- The revised policy defines staff responsibilities and limitations concerning the use of force, while still allowing discretion in the appropriate application of force.
- The policy identifies the proper use of force authorized for departmental peace officer staff, as well as when force can be applied, in what manner and the type of force in which departmental peace officers are trained.
- The policy ensures monitoring and supervisory evaluation of force deployment. It further ensures discipline is imposed for violations of the Use of Force policy, procedures, or training.

#### **Phase I:**

- Design WIN to track Use of Force data.
- Assess Use of Force data to determine changes/trends in frequency and amount of use of force. Also determine staff reliance on force to accomplish mission.

#### **Phase II:**

- DJJ will evaluate use of force incidents and continue to consult with experts to assist in creating a system in which the use of force is significantly reduced.

## Outline of Revised Use of Force Policy

- It is the policy of the Division of Juvenile Justice to accomplish the educational, rehabilitation/treatment and supervision functions with minimal reliance on the use of force.
- The Use of Force policy defines staff responsibilities and limitations concerning the use of force (while still allowing discretion in the appropriate application of force).
- The policy identifies the proper use of force authorized for departmental peace officer staff, as well as when force can be applied, in what manner and the type of force in which departmental peace officers are trained.
- It ensures monitoring and supervisory evaluation of force deployment. It further ensures discipline is imposed for violations of the Use of Force policy, procedures, or training.
- Force shall be used only when reasonably necessary to subdue an attacker, overcome resistance, effect custody, or to gain compliance with a lawful order.
- At no time are staff permitted to use force against a youthful offender for punishment, retaliation, or discipline.
- The policy includes definitions for reasonable force, unnecessary force, excessive force, deadly force, and great bodily injury.
- The policy identifies use of force options as dialogue/verbal persuasion, chemical agent, physical strengths and holds, mechanical restraint, less-lethal, and firearms.
- When force is used at a level of chemical restraint or above, or when a youthful offender(s) is involved in a physical altercation, medical evaluation shall be provided to the youthful offender(s) as soon as practical. All staff who use or witness force must complete a report and document their observations.
- It is the responsibility of all managers and supervisors to ensure that employees receive appropriate training and understand the Use of Force Policy, including both the application and subsequent documentation.
- It is the responsibility of all employees to understand and comply with the Use of Force Policy, related procedures, ongoing training, and applicable law.
- The policy defines two types of force: immediate and controlled.
  1. Staff may use immediate force when the behavior of the youthful offender(s) constitutes an imminent threat to the safety of any person or persons or the security of the institution.

2. A controlled use of force is appropriate when the presence or conduct of a youthful offender(s) poses a threat to safety or security, and the youthful offender(s) is located in an area that can be controlled or isolated. These situations do not normally involve an imminent threat to other persons, or a significant breach of institutional security. A controlled use of force requires authorization and presence of not less than a Chief of Security or the Superintendent's designee. A secure area extraction shall not be conducted without the physical presence of medical personnel. In addition, during controlled use of force extractions involving mental health offender(s), a licensed medical/mental health professional will be contacted and present if time allows. All controlled uses of force shall be videotaped. The videotape shall include a prior cool-down period of reasonable length to allow the offender to comply with staff instructions.
- All use of force shall be reviewed at a supervisory level and by the Institutional Force Review Committee. The following factors must be evaluated: the extent of any injury suffered, the need for the application of force, the relationship between that need and the amount of force used, the threat reasonably perceived by the responsible officials, and any efforts made to temper the severity of the force used.
- i. On at least a monthly basis, the Institutional Force Review Committee (IFRC) shall meet to review all completed use of force incidents after critique by area managers.
  - ii. The IFRC shall examine all levels of responsibility exercised by subordinate managers and supervisors, and ensure the appropriateness of completed documentation.
  - iii. The IFRC shall make a determination concerning the appropriateness of the use of force, based on the information and reports available.
  - iv. The Superintendent/Assistant Superintendent shall personally view all videotapes arising from use of force incidents. IFRC is a team tasked with evaluating and monitoring force and is comprised of the Superintendent/Assistant Superintendent, Chief of Security, and at least one other manager (Program Administrator/Treatment Team Supervisor /Lieutenant) selected on a rotational basis. Additionally, other staff may attend as guests to observe the process.
  - v. A database containing use of force information shall be maintained. The database will be capable of producing various statistical reports to be utilized by managers to monitor trends and patterns of force used.
  - vi. All videotapes that record the Use of Force by staff shall be retained for a period of five years.
  - vii. The Department Force Review Committee (DFRC), designated by the Chief Deputy Secretary, is to review a minimum of ten percent of Use of Force incidents to ensure staff's actions are in accordance with Use of Force policy, procedure, and training. The DFRC will ensure the institution executives are conducting qualitative analysis of each

use of force incident. The Department's compliance unit shall be responsible to conduct audits of the Department's use of force incidents.

- viii. The Division of Juvenile Justice has a standardized Use of Force data report. This report addresses the following: previous month's use of force, identification of mental health youth, gang affiliation, ethnicity, type of force, reason for force and chemical agent or munitions used. This data report is manually developed by security, as WIN does not currently have this capability. (See Phase I for proposed remedy)

## Improving Behavior Management Options

## GRADUATED SANCTIONS/DISCIPLINARY SYSTEM AND POSITIVE INCENTIVES

### **Current System**

Under the current system, DJJ utilizes a disciplinary system to respond to youthful offender misconduct. The disciplinary system provides a graduated system of discipline designed to be administered commensurate with the seriousness of the misconduct. The system incorporates statutory and constitutional mandates and provides essential due process guarantees to ensure fairness and equal application. A disciplinary system is essential in creating a safe and secure environment.

Misconduct is categorized into three levels: Level 1 minor misconduct; Level 2 intermediate misconduct; and Level 3 serious misconduct. Each level of misconduct is processed in a different manner with each having different timeframes and levels of review and response. Misconduct that is very serious in nature may be referred to the District Attorney's Office for possible prosecution.

If a youthful offender's projected Board date is extended as a result of misconduct, the youthful offender may earn back half of the time received for the last offense if he/she is able to remain free of serious misconduct for 12 consecutive months. Certain offenses are excluded.

Currently, each facility has its own phase system and usually, a youthful offender's phase determines the privileges he/she receives. Some privileges include: late nights, special programs, canteen, intramural sports, etc. Various staff are responsible for rewarding positive behavior and various staff can restrict a youthful offender's privileges as a result of disciplinary action. Youthful offenders can also lose privileges as a result of phase demotion.

### **Challenges/Problems with the Current System**

The disciplinary system does not include an appeal process for Level 1 minor misconduct due to the minor nature of the prescribed sanctions; however, minor misconduct is also being used to determine privileges and the ability to earn program credits, thus increasing the consequences and the need for an appeal system.

Sanctions for Level 3 serious misconduct are often delayed due to the workload of the investigators, fact finders and disposition makers. The delay decreases the impact and effectiveness of the sanction in modifying behavior. It is also difficult for youthful offenders to have disciplinary time restored for demonstrating positive behavior.

The quality of behavior reports, investigation reports, fact finding reports, and disposition reports is often inadequate due to insufficient training, heavy workload, and limited monitoring.

The system does not address providing assistance for youthful offenders with disabilities, including offenders with cognitive or other disabilities that limit youths' reading and writing abilities.

There is no consistency in the phase system between or among facilities, and individual incentives are few. There is minimal monitoring and no one is responsible for determining appropriate incentives.

### **Proposed Changes**

Beginning immediately, DJJ will increase the ability for youthful offenders to earn back disciplinary time with good behavior. Youthful offenders will be able to earn back more time twice as fast. DJJ will explore further reducing Board date extensions as a disciplinary measure in the long-term, and will assemble a team to develop a broader array of graduated sanctions.

In Phase I, DJJ will revise the disciplinary policy to include an appeal system for Level 1 minor misconduct, reduce the length of time it takes to process Level 3 serious misconduct, and provide assistance for youthful offenders with disabilities consistent with the Wards with Disabilities Remedial Plan. DJJ will also develop a standard for presentation of court cases to district attorneys.

In Phase II, DJJ will revise the disciplinary system to be fully integrated with the individualized risk/needs assessments and Individual Change and Accountability Plans.

DJJ will further refine its system for Graduated Sanctions, including disciplinary measures and positive incentives, after development and implementation of the Risk/Needs Assessment and significant implementation of the Phase I living units. This will enable DJJ to build upon these related factors to further improve the disciplinary system. When the Graduated Sanctions system is updated or improved, the modifications will be provided to the court,, as necessary.

DJJ is in the process of replacing the phase system with an Incentive Program that encourages positive programming through positive reinforcement. This new program was developed by a committee tasked to review and revise or replace the phase system. Full implementation of the Incentive Program is expected by the end of this fiscal year (FY 05-06).

In the short-term, as noted in the section related to the Core Rehabilitation/Treatment Program, DJJ will consult with external experts and trainers to work with living unit staff on developing a “normative culture.” This will include incorporating positive incentives as well as further development and/or improvement of the Incentive Program.

In the long-term, DJJ will continue to evaluate and improve the Disciplinary System.

#### **Immediate:**

- The ability for youthful offenders to earn back disciplinary time with good behavior will be increased by revising the current policy as follows: (1) modify from 50% back *after 12 months* for youthful offenders who have not participated in serious misconduct to 50% back *after 6 months*; (2) allow youthful offenders to earn back time for more than one offense, with 6 months of good behavior required for each offense; and (3) change the language that states, “If a ward’s projected board date was extended by an odd number of months, the number of months to be restored shall be rounded down” to “...the number

of months to be restored shall be rounded up.” The latter change will allow a youthful offender who received a one-month time add to have the one month restored; under current policy he/she cannot get any time restored. Similarly, a youthful offender who received 3 months can have 2 months restored rather than only 1 month. The offenses listed in the current policy that do not permit restoration would remain the same, i.e., assault or battery on staff and any offense involving battery on a ward where the victim died or was permanently disabled.

- Eligibility for restoration of disciplinary time will be reviewed at each youthful offender's next case conference. If the youth is eligible, restoration forms will be completed and submitted to the Juvenile Justice Administrative Committee.
- The Chief Deputy Secretary will establish a team of internal and external experts to develop a broader array of graduated sanctions and to propose additional potential, positive incentives. This team will explore the possibility of further reducing projected Board date extensions as a disciplinary measure in the long-term.
- The recently developed Incentive Program will be fully implemented. Youthful offenders will be able to choose from a variety of incentive options that have weighted values.
- The new program includes three incentive levels. Incentive Level A is the highest level a youthful offender can obtain. Youthful offenders must be performing positively and must complete an application to be considered for Incentive Level A. Youthful offenders on this level may earn 15 program credits per month and are eligible for the most privileges. Youthful offenders on Incentive Level A who do not complete 27 maximum program days within a 30-day period or who participate in intermediate misconduct (not involving violence) will be removed from Incentive Level A and placed on Incentive Level B. Any misconduct involving violence would place the youth on Incentive Level C.
- Incentive Level B is the second highest level a youthful offender can obtain. Youthful offenders must complete 10 maximum program days within 14 consecutive days to obtain this level. Once a youthful offender is placed on Incentive Level B, the youth must complete 20 maximum program days in a 30-day period to maintain this level. Failure to do so will result in placement on Incentive Level C. In addition, if the youthful offender participates in more than 2 incidents of intermediate misconduct, he/she will be placed on Incentive Level C. Any misconduct involving violence would place the youthful offender on Incentive Level C regardless of maximum program days. Youthful offenders on Incentive Level B are eligible to earn up to 9 program credits per month.
- Youthful offenders are placed on Incentive Level C when they do not complete 20 maximum program days in a 30-day period or they participate in any intermediate or serious misconduct that involves violence. Youthful offenders on Incentive Level C are eligible to earn up to 5 program credits per month.
- A maximum program day is defined as a day in which the youthful offender does not participate in minor, intermediate or serious misconduct.
- The youthful offender's assigned Youth Correctional Counselor will keep track of earned incentive credits.
- Youthful offenders will be provided the opportunity to stay up an hour later if they demonstrate positive behavior throughout the day.



- As noted above, a youthful offender's incentive level determines the number of credits he/she can earn. The credits can be used to purchase various incentives such as barbeques, concerts, family nights, holiday parties, movie nights, pool parties, additional canteen, video games, personal clothing, and personal property.
- Youthful offenders can also earn additional incentive credits by participating in restorative justice projects.

#### Phase I:

- An appeal process will be implemented for Level 1 minor misconduct.
- The length of time it takes to process Level 3 serious misconduct cases will be reduced. Timeframes will be modified from 24 days for fact finding hearings to 14 days and from 14 days for disposition hearings to 7 days.
- A standard will be developed for presentation of court cases to district attorneys.
- Youthful offenders with disabilities, who require accommodations, including youthful offenders with cognitive or other disabilities that limit reading and writing abilities, will be provided assistance in the disciplinary process consistent with the Wards with Disabilities Remedial Plan.
- Staff who assist youthful offenders with disabilities and staff who conduct disciplinary investigations, fact finding hearings, and disposition hearings will be provided adequate training.
- A standardized duty statement will be developed for Disciplinary Coordinators.
- Youthful offender orientation will be improved by developing curriculum, providing training, and updating the Youthful Offenders' Rights Handbook.
- All staff will be trained on the disciplinary system with specialized training for staff responsible for conducting disciplinary investigations, fact finding hearings, and disposition hearings.
- DJJ will bring in consultants/trainers on "normative culture" to work with living unit staff and assist with further development of the Incentive Program.
- Staff will monitor the Incentive Program and coordinate various activities to encourage positive behavior.

#### Phase II:

- Headquarters oversight will be improved by increased monitoring, site visits, and development of action plans.
- Weekly and monthly reports will be developed and automated.
- Monitoring will be improved by having dedicated staff to evaluate, track, and monitor the disciplinary system.
- The disciplinary system will be revised to ensure that it is fully integrated with individualized risk/needs assessments and Individual Change and Accountability Plans.
- Once modifications are made to the Incentive Program with the assistance of outside consultants, DJJ will submit in court a modified plan for Graduated Sanctions, including positive incentives.

## Youthful Offenders' Rights

## GRIEVANCE SYSTEM

### **Current System**

The intent of the Grievance System is to provide a fair, simple, and expeditious method for the resolution of youthful offender complaints, as required by Welfare and Institutions Code section 1766.5. A youthful offender who decides to file a grievance obtains the appropriate form from the Grievance Clerk, completes the grievance and returns it to the Clerk for processing. The Grievance Clerk is a youthful offender elected by his/her peers.

There are three types of grievances: Regular, Emergency and Staff Action (complaint alleging staff misconduct). Each type of grievance is processed differently with each having different timeframes and levels of review and response.

### **Challenges/Problems with Current System**

Youthful offenders cannot file a grievance without obtaining the form from the Grievance Clerk and they have no way to ensure that the clerk submits their grievance for processing.

There is minimal oversight and monitoring and as a result, grievance responses often exceed timeframes, responses are inadequate and many grievances are lost in the process.

Mixing complaints alleging staff misconduct with grievances is ineffective and has proven to be very difficult to handle within the Grievance System. Complaints alleging staff misconduct require a more formalized investigatory process rather than the older tradition of dispute resolution that was the origin of the Grievance System. The manner in which complaints alleging staff misconduct are processed varies by facility.

Training for staff and youthful offenders is inadequate.

The system does not include a process for youthful offenders with disabilities to submit grievances that request accommodations or allege discrimination, nor does it address providing assistance for youthful offenders with disabilities.

### **Proposed Changes**

Beginning immediately, DJJ will strengthen the Grievance System by improving a youthful offender's access to the system, increasing monitoring to ensure timely and adequate responses, developing a process for youthful offenders with disabilities to submit grievances that request accommodations or allege discrimination, and by providing adequate training for youthful offenders and staff. DJJ will also separate complaints alleging staff misconduct from grievances.

In Phase I, DJJ will ensure that youthful offenders with disabilities, who require accommodations, including youthful offenders with cognitive or other disabilities that limit reading and writing abilities, will be provided assistance in the grievance process consistent with the Wards with Disabilities Remedial Plan. DJJ will also ensure that staff who assist youthful

offenders with disabilities and staff who respond to grievances filed by youthful offenders with disabilities are provided adequate training consistent with the Wards with Disabilities Remedial Plan.

Flowcharts depicting the separate processes for complaints alleging staff misconduct, emergency grievances and regular grievances are provided at the end of this section.

Immediate:

- Forms on which to file grievances or complaints alleging staff misconduct will be available on all living units in a location accessible to youthful offenders without assistance from staff or clerks.
- A lock box will be installed on every living unit for submission of forms to prevent lost grievances.
- The role of the clerk will be redefined to ensure this position is no longer responsible for issuing, recording, submitting and tracking grievances but rather is responsible for ensuring an adequate supply of forms on the living unit and educating and assisting youthful offenders in the grievance process.
- Youthful offenders will be notified upon receipt of grievances and complaints alleging staff misconduct.

Phase I:

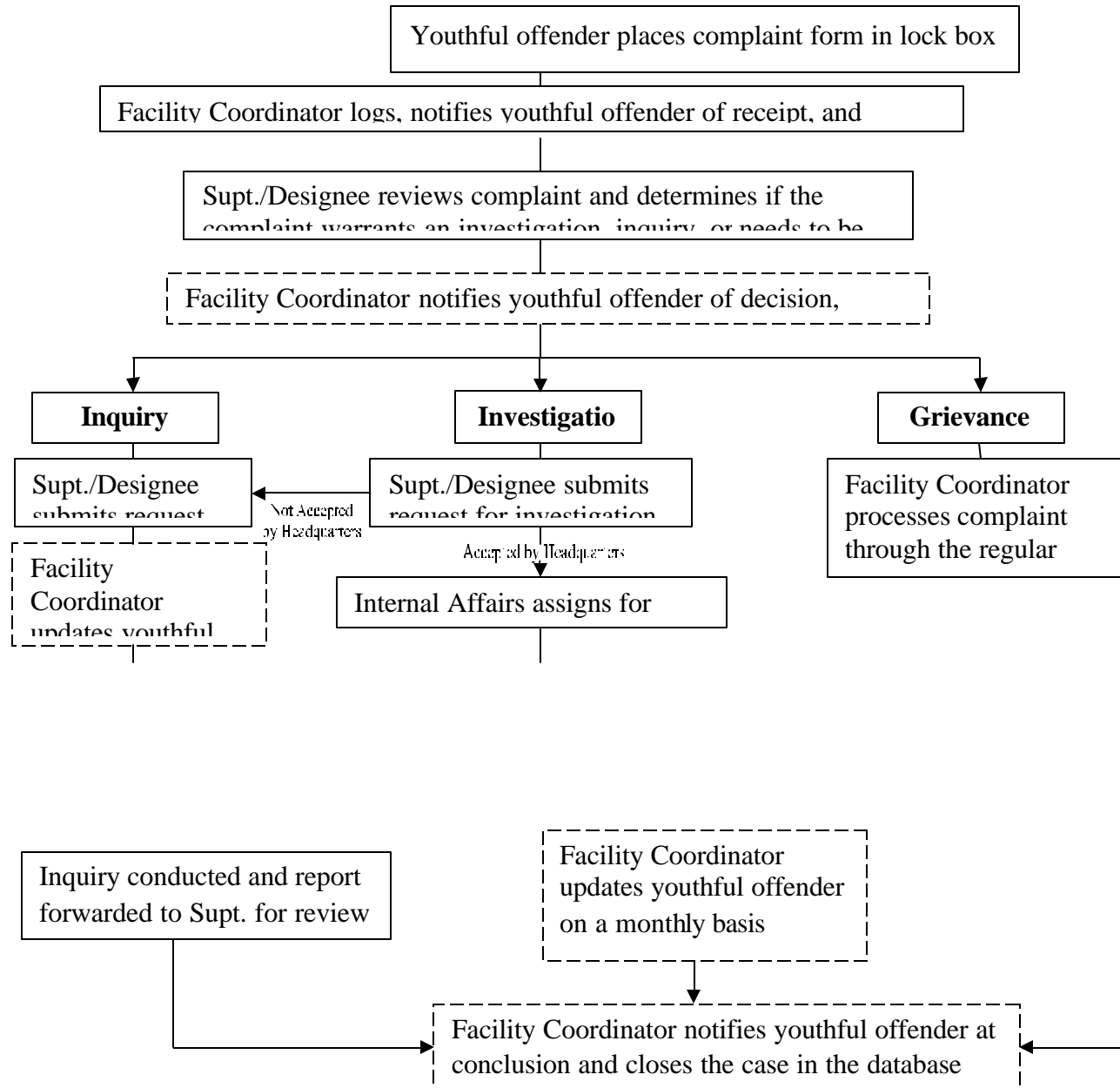
- Monitoring will be improved at the facilities by scanning, tracking and monitoring all grievances and complaints alleging staff misconduct, as well as by collecting and presenting data to the local management team on a monthly basis for review of trends and development of intervention strategies.
- A process will be developed to address abuse of the grievance system with regard to excessive filing, inappropriate statements (profanity, obscene language), excessive verbiage (pointless verbiage or voluminous unrelated documentation), and lack of cooperation (refusal to be interviewed or cooperate with the reviewer).
- Youthful offenders will be required to attempt informal resolution for most regular grievances except for grievances that pertain to department regulations, policies or procedures, or denial of reasonable accommodation requests.
- A process will be developed for youthful offenders with disabilities to submit grievances that request accommodations or allege discrimination.
- Headquarters will improve oversight by reviewing timeframes and quality of responses on a regular/random basis as well as by collecting and evaluating data, reporting findings, and assisting facility staff with the development of action plans to address deficiencies.
- A standardized duty statement will be developed for staff responsible for monitoring and processing grievances. Duties will include monitoring timeframes, reviewing and ensuring adequate responses, training staff, holding monthly meetings, training youthful offender clerks, preparing monthly reports, reviewing data for trends and development of intervention strategies, as well as conducting inquiries into complaints alleging staff misconduct.
- Weekly and monthly reports will be developed and automated.
- Complaints alleging staff misconduct will be separated from grievances.

- The policy will clearly designate who can respond on behalf of the Superintendent to complaints alleging staff misconduct.
- All staff in DJJ facilities, whose job responsibilities include direct, ongoing contact with youthful offenders, will be trained on the Grievance System.
- Youthful offender orientation will be improved by developing curriculum, providing training, and updating the Youthful Offenders' Rights Handbook.
- Staff responsible for tracking, monitoring, conducting inquiries and responding to grievances will be provided specialized training.
- Youthful offenders with disabilities, who require accommodations, including youthful offenders with cognitive or other disabilities that limit reading and writing abilities, will be provided assistance in the grievance process consistent with the Wards with Disabilities Remedial Plan.
- Staff who assist youthful offenders with disabilities and staff who respond to grievances filed by youthful offenders with disabilities will be provided adequate training consistent with the Wards with Disabilities Remedial Plan.

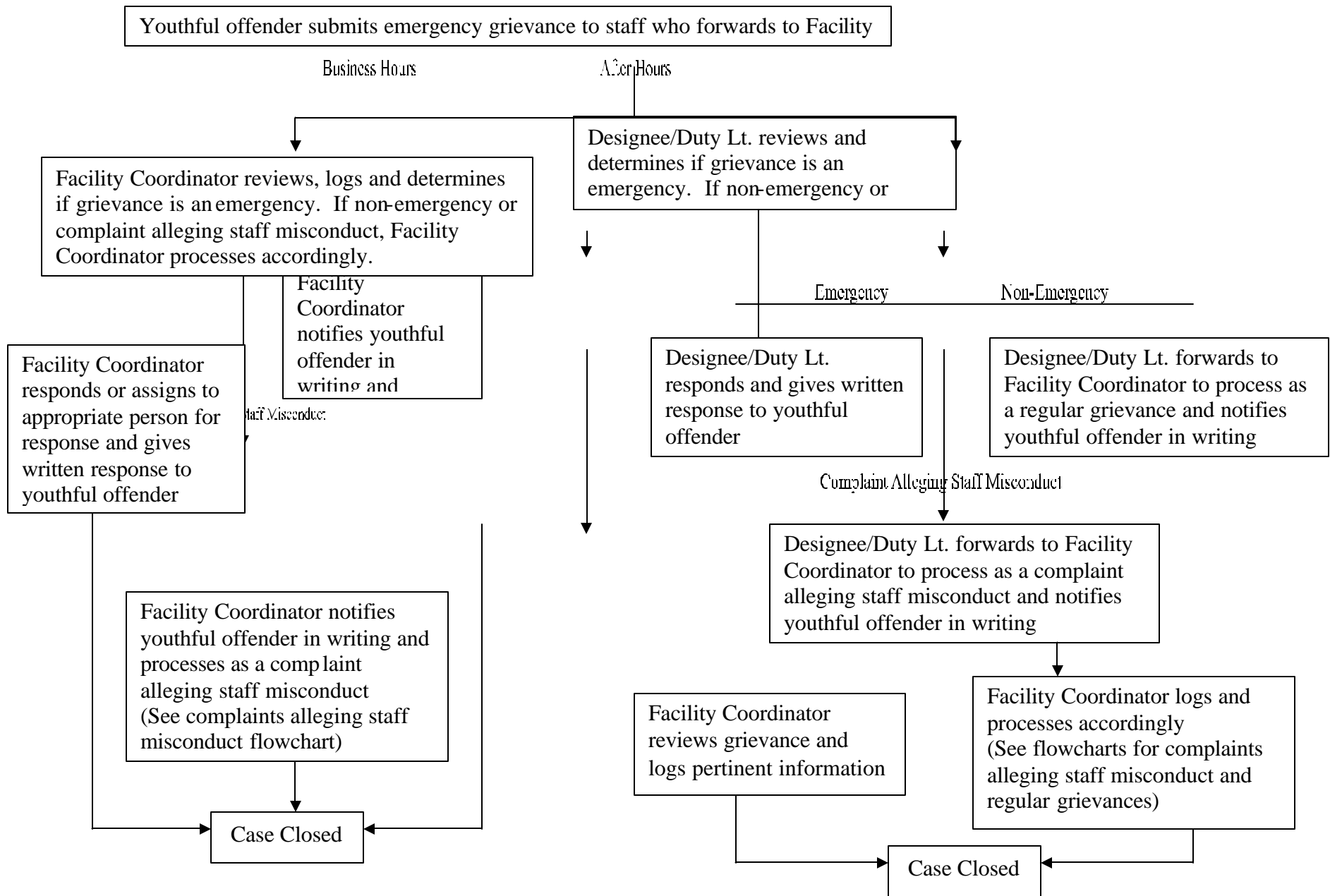
Long-Term:

- Continuous review and evaluation of the Grievance System and processes. Any additional changes will be proposed as needed, based on the implementation of those changes already delineated.

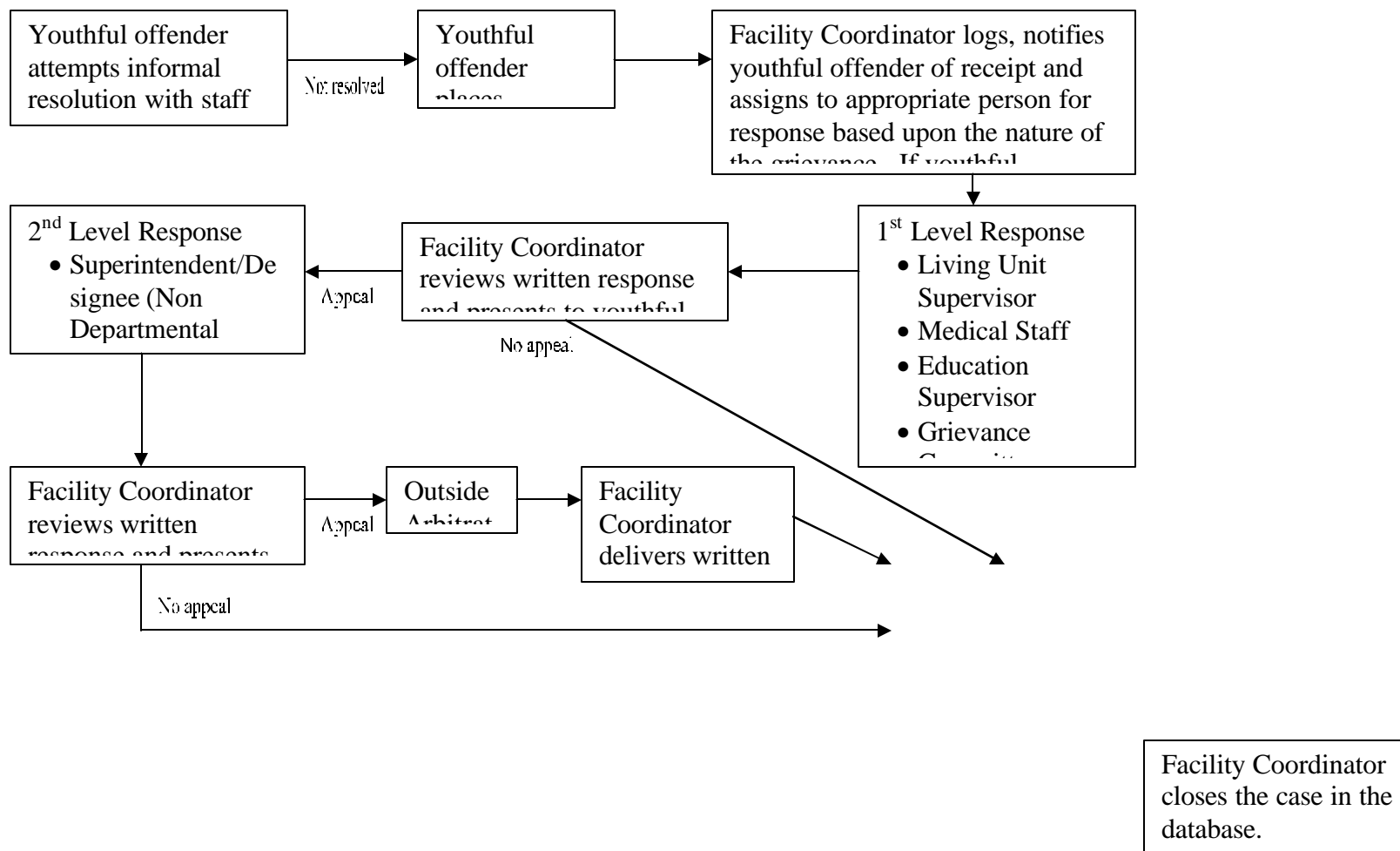
## PROCESS FOR COMPLAINTS ALLEGING STAFF MISCONDUCT



## PROCESS FOR EMERGENCY GRIEVANCES



## PROCESS FOR REGULAR GRIEVANCES





## ACCESS TO COURTS

### **Current System**

The Division of Juvenile Justice mandates that a youthful offender, irrespective of program status, shall not be denied or obstructed in his/her efforts to obtain legal materials and present a petition or legal document to the courts. Youthful offenders and departmental staff are provided information regarding new court decisions which are identified by the departmental legal office as affecting a substantial number of offenders. Fundamental constitutional right of access to courts requires DJJ to assist youth in the preparation and filing of meaningful legal papers by providing youthful offenders with adequate legal libraries or adequate assistance from persons trained in law.

Regarding attorney-ward communication, staff may not subject visits between an attorney and a youthful offender to auditory supervision. To the extent practicable, attorney visits are to take place in a private room. Where such a room is not available, the attorney visit may occur in a regular visiting room, provided the youthful offender and his/her attorney have a degree of separation from other visitors. The Superintendent shall allow a youthful offender to contact and retain attorneys. With the written consent of the offender, staff may advise an attorney of the youth's available funds. Staff may not interfere with the selection and retention of attorneys if the youthful offender has attained majority and is mentally competent. If the offender is mentally incompetent or a minor, the Superintendent shall refer to the youth's guardian or to the appropriate court all matters concerning the retention and payment of attorneys.

The Superintendent may not apply frequency limitations on youthful offender telephone calls to attorneys when the offender demonstrates that communication with attorneys by correspondence, visiting, or normal telephone use is not adequate.

The Department provides each youthful offender with several methods to maintain confidential contact with his/her attorney. For example:

- Offender-attorney correspondence is covered under the non-reviewable mail provisions;
- Private offender-attorney visits are provided; and
- Youthful offender is afforded the opportunity to place an occasional unmonitored call to his/her attorney.

### **Challenges/Problems with Current System**

Law libraries are managed between two branches, i.e., Education handles operations while Institutions and Camps administers the budget, creating a lack of coordination.

Both the orientation packet and the Youthful Offenders' Rights Handbook lack information regarding access to the law library and courts.

The Division's law libraries currently use printed text as opposed to electronic/internet access/ An electronic library would eliminate such problems as storage space, outdated materials, and continual purchase/costs of new and/or revised materials.

Currently, there is no startup or refresher training for facility staff concerning providing access to a law library and access to court.

### **Proposed Changes**

DJJ will ensure youthful offenders are aware of their rights regarding access and that each library has a full complement of updated legal materials.

#### **Immediate:**

- Education Services Branch (ESB) will assume full responsibility for the operations of DJJ law libraries, including the budget. Presently the law libraries are under the supervision of the Institutions and Camp Branch and the Education Services Branch. The Institutions and Camp Branch has been responsible for payment of legal materials purchased as approved by the Department's legal office. Supervision of the law libraries, preparation of invoices and audits has been the responsibility of ESB. ESB will assume oversight responsibilities for full operations of the law libraries within DJJ. ESB will assume responsibility for tracking the need for updated/current materials, managing the budget regarding materials' purchases, ensuring the development and submission of invoices to the accounting office, and audits of access and materials compliance.
- DJJ will revise the Youthful Offenders' Rights Handbook and orientation program to include information regarding access to the law library and attorneys, in order to address concerns in the Expert's Report, Summer 2001, which identified four critical components needing to be remediated in order for DJJ to protect youthful offenders' rights to Access the Court .

The four critical components are:

- Many wards had no idea that law libraries were available to them.
- Many wards were not aware of the steps they need to take to request access to the facility law libraries.
- Most wards were unaware of other reasons (e.g., civil and family court matters) that might lead them to seek legal representation.
- Access to legal materials should be part of an educational process in ward rights. The Youthful Offenders' Rights Handbook and Orientation Program will include information related to:
  - How to sign up to utilize the law library.
  - How to sign up while on restricted programs.
  - How to use the law library.
  - Steps required contacting an Attorney.
- DJJ will also conduct Annual School Site audits to determine compliance and will purchase needed law library materials.

Note:

Access to Courts by youth with disabilities is addressed in the Disability Remedial Plan.

#### Phase I:

- DJJ will develop a tracking system within WIN to indicate the number of times the law library is used at each site as well as data as to whether a youthful offender visited the library or information was gathered for him/her.
- DJJ will replace existing print libraries with electronic/internet libraries, as appropriate. Two alternative formats are CD-Roms or On-Line Internet/CDs. The least expensive option is using the internet. Benefits of an internet library include, but are not limited to:
  - access to continually updated materials,
  - insurance that all 8 DJJ law libraries are providing full access to current legal materials, and
  - elimination of the need to dispose of outdated materials.
- DJJ will develop compliance measurements for monitoring performance in the area of offender access to courts.
- DJJ will develop, and train staff on, curriculum addressing access to courts and law library. DJJ staff have a legal obligation to ensure youthful offenders are afforded their constitutional rights. Training of staff is critical to ensure that youthful offenders' rights are protected. The Department expects all staff to have a clear understanding of the policy regarding access to courts.
- In addition to the initial training, refresher training will be developed on access to courts and law library.
- DJJ will develop clear and consistent policies and procedures regarding access to courts and law library.

#### Long-Term:

- To be determined if and as needed.

## ACCESS TO RELIGIOUS SERVICES

### **Current System**

DJJ recognizes the constitutional rights to hold religious convictions and practice religion. All youthful offenders are afforded the reasonable opportunity to participate in religious services and programs. Exercise of religion without discrimination or preference is guaranteed unless this is inconsistent with the safety and/or security of the institution.

DJJ staff have a legal obligation to ensure youthful offenders are afforded their constitutional rights and must allow access to religious services/programs without prejudice or preferences to all offenders, regardless of level or program status.

In late 2002, the Department formed a committee to review existing laws and statutes and revise CYA's religious policy to comply with current law. The Religious Land Use and Institutionalized Person Act (RLUIPA) is the current law with which the revised CYA policy complies.

RLUIPA states:

No government shall impose a substantial burden on the religious exercise of a person confined in an institution, even if the burden results from a rule of general applicability, unless the government demonstrates that imposition of the burden on that person, and

1. Is in furtherance of a compelling government interest; and
2. Is the least restrictive means of furthering that compelling government interest

The revised policy, completed and approved in the spring of 2003, contains four core components:

- Access to religious services/programs
- Access to chaplains/religious faith group leaders
- Documentation and automation
- Standardization and consistency at all institution and camps

The revised policy was submitted to all CYA institutions for mandatory training of all staff affected by the implementation. This training was completed in the early summer of 2003. The revised policy was implemented September 1, 2003.

### **Challenges/Problems with Current System**

There is no dedicated position to provide oversight of religious programs and functions. There is no current system to monitor for accessibility and/or demonstrate compliance with the law.

Some program areas are deficient regarding correctional institutional religious practices.

The Youthful Offenders' Rights Handbook fails to include specific information regarding religious access.

## **Proposed Changes**

DJJ will ensure the existing religious policy complies with current law and that staff are knowledgeable about DJJ's policies and practices pertaining to access to religious services and programs. DJJ will ensure youthful offenders are aware of their rights and are made aware of the practices pertaining to access to religious services and programs.

### **Immediate:**

- DJJ is currently addressing deficiencies identified during an audit completed in March 2005. The audit revealed the following risk management issues:
    - Some staff continue to be “suspect” of a youthful offender’s religious belief.
    - Some staff view the youthful offenders’ use of the “Change of Faith Form” as a manipulative tool to disrupt the safety and security of the institution.
    - Religious services scheduling remains in conflict with other mandated treatment services.
    - Some staff believe that youthful offenders on the lowest phase can be denied religious services.
    - The entering of information to the Ward Information Network (WIN) 2000 system is lacking by some staff and religious providers.
    - Volunteers for other belief systems, such as Jehovah Witness, are lacking in many institutions.
  - To address those deficiencies, DJJ will train managers and supervisors on the new report formats, i.e., the Living Unit Supervisor Weekly Report and the Administrative Monthly Report and will ensure the Living Unit Report is completed and submitted weekly by the living unit supervisor to the living unit manager and the facility superintendent. This report addresses unit level information such as the number of youthful offenders who signed up and actually attended a religious function, type of religious activity, number of youthful offenders who did not attend and why, number of youthful offenders requiring and receiving alternate services, etc.
  - These reports allow for data comparisons and identify possible deficiencies that may exist on particular living units, e.g., the number of youthful offenders identified with a particular religious affiliation and the number actually attending that affiliation’s services. It tracks compliance measures such as timeframes for alternate services. The superintendent is expected to address any identified violations or inconsistencies.
  - DJJ will revise the Chaplain Handbook to reflect policy changes and updated information.
  - Refresher training will be developed and provided to staff on revisions to the religious programming policy and modifications to WIN 2000. The revised religious policy contains four core components:
    - Access to religious services/programs
    - Access to chaplains/religious faith group leaders
    - Documentation and automation
    - Standardization and consistency of all institution and camps
- Changes to WIN 2000 include:
- The Religious ID Form has been restored to the original format with the a new form number.
  - The Clerical screen places “Protestant” and “Christian” religions into the "Protestant" category (not the “Other” category as was previously the case).

- A one-time automatic update process changes the values in the "Religions" category to the following :
  - Protestant
  - Catholic
  - Jewish
  - Muslim
  - Native American
  - Other
  - None
  - Unknown
- Finally, among Immediate changes, DJJ will establish schedules for Review Team audits.

#### Phase I:

- DJJ will provide oversight to monitor and ensure compliance with policies and regulations regarding Access to Religious Programs in a Correctional Setting.
- A dedicated Religious Coordinator will be established to oversee uniform enforcement of constitutionally mandated religious programming to youthful offenders in all DJJ facilities. The Religious Coordinator will also monitor all institutions through the WIN 2000, WIN Exchange, and field visits to ensure:
  - Religious services/ programs are provided for various faith groups.
  - All youthful offenders have access to religious services/programs and materials.
  - There is proper documentation of services/programs in the WIN 2000.
  - Responses to all religious content letters sent to the Chief Deputy Secretary/Director, as well as appeals/grievances related to religious programs.
  - Oversight of religious policy and manual revisions.
  - Oversight of Chaplain training.
  - The pursuit of grants available from state, federal (Faith Based Initiative), and other sources.
  - The Department is represented at various interdepartmental meetings, professional chaplain organizations, and conferences such as the State Advisory Council on Institutional Religion (SACIR), Association of Chaplains in State Services (ACESS) and Bureau of Prisons (BOP).
  - The development of an Internship Program for DJJ's chaplaincy.
- DJJ will revise the Youthful Offenders' Rights Handbook to reflect changes in policy and regulations. The Handbook will be a primary vehicle for informing youth in DJJ of their constitutional religious rights and how they may practice their beliefs within the correctional environment. The Handbook will include information such as:
  - Procedure to sign up for any religious services/programs in Core Rehabilitation/ Treatment units.
  - Procedure to sign up for any religious services while in Behavior Treatment Programs.
  - How to obtain access to chaplains.
  - What personal religious materials are permitted.
  - How to notify staff/chaplains of special religious needs (dietary, identification, etc.)
 The Handbook will be accessible to youthful offenders on all living units.

Long-Term:

- Provide stipends to volunteers who deliver religious services to youthful offenders, as recommended in the Expert Report on General Corrections.

## Ensuring Success and Sustainability



## TRANSITION/TRAINING

### **Current System**

#### Transition / Culture Change

Four DJJ staff have been temporarily redirected to work on development of the *Farrell* lawsuit, but because new positions were not dedicated for this purpose, their previous functions are not being covered.

#### Training and Professional Development

Currently institutional training for DJJ peace officer staff must be completed in accordance with Bargaining Unit 6 Contract 8.05 which states “All employees shall be provided with a minimum of fifty-two (52) hours of annual training. This training shall be either individual or group formalized, structured courses of instruction to acquire skills and knowledge for an employee’s current or future job performance. The POST/CPOST approved portion of the training shall, as required by POST/CPOST, contain measurable learning objectives that can be evaluated in a classroom setting or in structured on-the-job training.” In July 2005 a joint labor/management committee verbally agreed on a specific training schedule of 52 hours for all Juvenile Justice Youth Facilities to follow. Pursuant to the reorganization of CDCR, the Office of Training and Professional Development met with the Juvenile Justice Training Officers and developed a revised (draft) schedule that includes 40 hours of Off-Post Training and 12 hours of On-The-Job Training. This revised program is designed to provide continuity within the Department for all peace officers under BU6. Delivery of the off-post training in the current fiscal year (2005-06) has been hampered by the lack of relief staff to allow posted peace officers to attend the training.

All non-peace officer staff of the DJJ are expected to attend New Employee Orientation. If they are assigned to a facility or parole office, they are also expected to attend a one-week “Ancillary / Correctional Staff Academy.” Annual training is additionally required for some topics. This training has not been regularly provided to staff. As part of the reorganization of CDCR, the Office of Training and Professional Development is currently reviewing all training mandates to ensure that all legally required training is identified and that staff are provided with the training.

### **Challenges/Problems with the Current System**

As indicated above, DJJ is currently redirecting four staff to work on developing the Safety and Welfare Plan, but there is no one filling behind these staff, resulting in significant workloads left uncovered. Continued development and effective implementation of the immediate, short, and long-term strategies identified herein will require a dedicated team of individuals working with expert consultants to focus specifically on continued program development, culture change, and successful transition over the course of at least the next three years.

With respect to more general staff training issues, under the current system training is not consistently provided or monitored throughout DJJ. All employees do not currently receive mandated training. Training Officers are needed at every facility to help identify training needs, schedule training, and monitor compliance.

## **Proposed Changes**

### **Transition/Organizational Change**

DJJ will establish a dedicated team to focus exclusively on continued program development. Per the recommendation of the court expert, consultant(s) in organizational/cultural change will be brought in to assist with conducting an assessment of the current culture; work with a transition team in developing the necessary steps for transition; provide training to the transition team and other staff as necessary; and provide ongoing consultation during implementation.

### **Juvenile Justice Policy**

DJJ will establish a Juvenile Justice Policy office, which will work with internal and external subject matter experts, to review all existing policies and make necessary revisions, based on the reforms outlined in this and the other remedial plans. As components of the plan are implemented and evaluated, this office, in conjunction with experts, will review recommendations for process improvements to determine if policy changes are needed to provide on-going system support for the reform's success. This office will be responsible for on-going development/modification of policies consistent with evidence-based practices.

### **Training and Professional Development**

CDCR has adopted a new model for training and professional development which requires a shift from the current stand-alone function with discrete training products to an integrated system which addresses performance, needs, and desired outcomes and simultaneously serves as a vehicle for creating positive cultural change in the organization.

Training, reconstituted as staff development, is a powerful means to achieve organizational goals, and as such should be tightly linked to the expectations, strategic goals, topical issues, and major activities of the Department.

In the new model, staff development programs will be designed to meet specific needs – that is, to solve an organizational performance problem. Once the job-related performance issue is identified, and the gap between current and desired performance is defined, specific goals or learning objectives of the training can be designed and delivered. This is in sharp contrast with an approach that assumes, for instance, that all staff need a particular mandated training course each year, and in which the training varies little from year to year.

Staff development programs will be based on job analysis and needs assessments, ensuring that the actual design will be tailored to meet specific needs and will be competency-based. Training hours for staff with demonstrated competency in a required topic will be focused on the individual's development needs, not on the delivery of content that the employee already has mastered.

DJJ received funding in the current fiscal year to conduct a training needs assessment to identify the gap between existing training and new training resulting from changes required by the *Farrell* remedial plans. As a result, the Department has entered into a contract with California State University, Chico to: 1) validate existing hours of training mandates and identify training needs and hours of training based on remedial plans using CDCR identified subject matter

experts; 2) analyze any and all differentials between what staff are doing now and what they will or should be doing in the above identified areas ( a training gap analysis); and 3) analyze existing course content.

This needs assessment will identify the amount, subject matter and method of training necessary for the programs, rehabilitation/treatment approaches, and processes outlined in the Safety and Welfare Plan, including:

- conflict resolution/crisis intervention training for all staff, beginning with the conflict resolution teams and living unit staff on the Phase I units;
- use of the risk/needs assessment for Case Managers;
- interactive journaling program for the Case Managers;
- SJS/CMC strategies for all living unit staff;
- substance abuse programming for staff on the SATP and STSAP units who have not received training for these programs;
- re-entry training for Re-entry Specialists;
- initial and ongoing training for all staff on policy and procedural changes related to *Farrell* remedial plans.

All training will be designed to incorporate motivational enhancement techniques.

Based on research from the “Best Practices” literature, DJJ will identify a core team of trainers who will provide ongoing training and quality assurance for certain program components, particularly the risk/needs assessment, SJS/CMC strategies, and conflict resolution/crisis intervention. This will guarantee in-house expertise and program sustainability. (Van Dieten, 2002)

For those units that are not part of Phase I, Chico State is also conducting a training needs assessment of the current YCC roles in order to develop the training necessary and appropriate for those staff until their units receive the enhanced resources described in this plan.

#### Immediate:

- In order to ensure the successful implementation of this plan, DJJ will establish dedicated resources to oversee the transition/ongoing development, and implementation of the new model.
- DJJ will conduct a survey of staff regarding attitudes about treatment vs. punishment in order to identify the barriers that need to be addressed to implement philosophical changes with the new model.
- The training needs created by this plan, which are significant, will be incorporated into the training needs assessment, currently under contract with UC Davis. (Note: Certain components described in this plan, e.g. SJS/CMC strategies, will require specific training by sole source vendors,. Training on these components will be incorporated into the strategies' vendors' contracts.) Once training needs have been determined and trainers either trained, contracted for or otherwise identified, DJJ will begin required training.

Phase I:

- DJJ will revise relevant policies to reflect revised mandated training, as determined by the training needs assessment.
- DJJ will provide ongoing training, as determined by the training needs assessment, in the academy, through ongoing classroom based training, and through supported on-the-job training.
- DJJ will develop, in consultation with experts, a quality assurance process to ensure skills learned in training are demonstrated by staff, as intended.
- Refresher training and other performance support measures will be developed to assist in increasing staff skills.

## COMPLIANCE/DATA MANAGEMENT/EVALUATION

### **Current System**

#### Compliance

Currently, DJJ has only one staff person dedicated specifically to compliance of the *Farrell* lawsuit (position approved in current budget). At the filing of this plan, all six plans will have been filed.

#### Data Management/Evaluation

DJJ does not have the current staff capacity to develop, implement, monitor or evaluate the plans outlined in this remedial plan. Nor is there an adequate Management Information System to assist in timely or accurate data management to monitor the new model and/or evaluate effectiveness.

### **Challenges/Problems with the Current System**

DJJ is likely to fall out of compliance quickly unless comprehensive compliance strategies and resources are put into place immediately. Similar lawsuits, although smaller in scope, in the adult operations division of CDCR have achieved successful compliance only after dedicated compliance teams were put in place at headquarters and in the field.

#### Proposed Changes

DJJ will develop a process to provide measurement feedback. Once a method for measuring relevant processes / practices is in place, the information must be used to monitor processes and change. As providing feedback to offenders regarding their progress builds accountability and is associated with enhanced offender change, the same is true within an organization. Monitoring delivery of services and fidelity to procedures helps build accountability and maintain integrity to the agency's mission. Regular performance audits and case reviews with an eye toward improved outcomes, keep staff focused on the ultimate goal of reduced recidivism through the use of evidence-based principles. (Miller, 1988; Project Match Research Group, 1997; Agostinelli et al, 1995; Alvero et al, 2001; Baer et al, 1992; Decker, 1983; Luderman, 1991; Miller, 1995; Zemke, 2001; Elliott, 1980)

In order to monitor and document whether the remedial plan changes have occurred and whether these changes have made a difference in terms of safety and quality of programming, it is necessary to collect and analyze a great deal of information. These information gathering efforts will have to be coordinated in terms of data collection, database creation and management, and ongoing statistical analysis

With respect to updating and enhancing its data management infrastructure, DJJ has been working on "WIN Exchange" for the past two years. WIN refers to DJJ's Ward Information Network. Unfortunately, the current system is not integrated. WIN is a set of distributed database systems, i.e., the system at each facility is isolated and independent from the system at every other facility. WIN Exchange provides a central repository and contains all the

data from all of the distributed sites into one WIN Exchange database. WIN Exchange also enables the WIN 2000 servers at DJJ facilities to share information with each other and with the WIN Exchange server. WIN Exchange also reduces repetitive data entry at all sites, standardizes data entry, and provides enterprise data to produce more timely and usable management and ward information reports. The project schedule is to begin testing WIN Exchange in January 2006 with a targeted implementation of May 2006.

DJJ will implement nationally recognized Performance Based Standards (PbS), a self-improvement and accountability system used in 27 states and the District of Columbia to better the quality of life for youth in custody. The Office of Juvenile Justice and Delinquency Prevention (OJJDP) called for the development of performance standards in 1995 to improve conditions of confinement at juvenile facilities. Developed and directed by the Council of Juvenile Correctional Administrators (CJCA), PbS sets national standards for safety, education, health/mental health services, security, justice and order within facilities and provides the tools to collect data, analyze the results to design improvements, implement change then measure effectiveness with subsequent data collection.

#### Immediate:

- An analysis will be conducted to identify additional resources needed to enhance the existing data management system (WIN, etc), so that offender information – assessments, case plans, etc. -- is available/accessible from all locations, such as all facilities, headquarters and parole offices. The projected resource needs will be measured against the additional data management resources provided to DJJ in the current budget to determine what additional resources may be required, if any.
- DJJ will consult with the court experts and other nationally recognized experts to identify infrastructure and other data management resources necessary to collect accurate and meaningful data on the measurements listed below.

#### Phase I:

- Dedicated positions will be established for data management, statistical analysis, quality assurance, and reporting at DJJ's facilities and headquarters.
- IT staff will be dedicated to working with program assessments, (e.g. SJS/CMC), and various data management forms and reports for monitoring and evaluation. These staff will work in conjunction with research staff in the data management component of the design and implementation of program evaluations.
- Dedicated staff will develop the offender placement system, which will incorporate assessments and other criteria, and will include an automated override process, reservation and triage process.
- DJJ will begin implementation of Performance Based Standards.

#### Interim Process and Outcome Measures

- The length of time spent at the Reception Centers.
- The amount of treatment and education services provided at the Reception Centers.
- Established criteria used for placement into lower and higher risk living units and into Behavior Treatment Programs.

(Regular reports will identify if the criteria is being overridden and if so, why.)

- Staff to youth ratios in Phase I units.
- Number of youth on living units per Phase I unit.
- Hours of rehabilitation/treatment provided to youth on Phase I units.
- Incidents resulting in injury to staff or youthful offenders.
- Amount of rehabilitation/treatment and education provided on Behavior Treatment Programs.
- Decrease in chemical restraint use per 100 person days of youth confinement.
- Percent of youthful offenders who have disciplinary time restored within a 6 month period.
- Percent of disposition hearings conducted within 21 days from date of incident.
- Percent of youthful offenders earning individual incentives.
- Percent of timely responses to grievances in a 3 month period.
- Percent of lost grievances in a 3 month period.
- Percent of offenders who have had in-person contact with family while in the facility.
- Rate of contact between facility staff and the offender's family.
- Percent of offenders who report they have had phone contact with family.
- Percent of offenders who have had in-person contact with Re-Entry Specialist.
- Percent of offenders with contact among family and Re-Entry Specialist and Parole Agent
- Hours of staff training.

In conjunction with experts, as new interventions/processes are implemented, additional outcome measures will be developed and implemented.

### III. Facility Needs



## THE NEED FOR FACILITY RENOVATION & NEW FACILITIES

### **Current System**

#### **Physical Plant**

With the exception of the latest facility, built in 1991, DJJ's current institutions were constructed over 40 years ago as reformatory schools for boys and girls. These facilities have exceeded their useful life and have not been properly maintained, resulting in a backlog of \$20 million in repair projects. In general, existing facilities lack flexibility, are inappropriate in terms of size, and were not designed to address the risk and treatment needs of today's more sophisticated population of youthful offenders. The one exception is the N.A. Chaderjian facility in Stockton, which was built using an adult prison design and therefore lacks the safe and appropriate programming space necessary for high-risk youthful offenders.

The discrepancy between the inappropriate design of the Department's existing institutions and its youthful offender population poses serious security concerns to staff, offenders, and the public, as well as an operational detriment to the goals of treatment and rehabilitation.

#### **Classification of Facilities**

In general, current facilities are not classified by risk level, program need or even by specific mission. The primary distinction among facility populations is age (under 18, over 18 or "swing"). As a result, high, moderate, and low risk offenders are often housed together.

### **Challenges/Problems with the Current System**

As described above, most facilities are serving multiple functions for a combination of higher and lower risk offenders with old physical plant designs that are not conducive to the Department's goals of providing safe, secure facilities and effective programming to reduce recidivism.

### **Proposed Changes**

#### **Analysis Based on Current Population**

DJJ originally anticipated proposing to sort the entire population based on the interim security classification assessment. However, after an analysis of the current population was conducted, based on the interim assessment (described in the Assessment section), DJJ realized that approach was neither feasible nor desirable. The analysis below illustrates why DJJ should not (even if it were feasible for implementation purposes) just immediately "sort" the entire existing population within our existing facilities based on the interim classification assessment. Doing so would result in a violation of some of DJJ's other placement criteria, including separating older youthful offenders from younger ones or keeping youth in the region closest to their homes.

The analysis below is based on the following:

- Given that DJJ only has two types of living units, open dorm and single room, the interim youthful offender classifications were divided into only two categories of risk (for institutional behavior) – “higher,” including the high and medium categories, and “lower,” including the low and moderate categories.
- Given this constraint, the analysis below assumes that higher risk youthful offenders and those with specialized treatment needs should be placed in single room units, if open dorms are the only other alternative, as they are in the current system. The open dorm units would be reserved for lower risk offenders or those without specialized treatment needs.
- As suggested earlier, it is important to note that “higher” and “lower” risk are relative to DJJ’s population, not to the juvenile justice population throughout the state. In this instance, lower means lower risk for institutional violence, not necessarily low risk to re-offend or low risk to public safety. In fact, of those offenders in the current population who have been designated as less serious offenders (Board categories 5, 6, 7) and are classified as low-moderate risk by the interim classification system (or “lower” in the analysis below), fewer than 100 were not committed for a violent or weapons related offense.
- Living unit sizes were assumed to be similar to those outlined in this plan, i.e., 38 for open dorm units, 36 for single room units, and 24 for Behavior Treatment Programs. (The long-term Facilities Master Plan will propose to build even smaller living unit sizes, closer to national standards.)

As the analysis below demonstrates, DJJ does not have the necessary range of high and low risk units in each region to immediately sort all youth using the interim tool. An immediate sort of the current population based on age, risk (of institutional violence), and treatment need would require the following facility capacity, which DJJ will not have until significant resources have been appropriated to construction and renovation. For this reason, and because of realistic implementation constraints, including the time it takes to hire and train new staff, DJJ has developed the phased-in implementation strategy described in earlier sections.

#### Northern California

##### Male Offenders Needing Higher Risk/Higher Need (Single Room) Units:

- Under 18
  - Higher Risk Core Program 94 (3 units)
  - Higher Risk Substance Dependence 89 (3 units)
  - Intensive Mental Health Needs 70 (2 units)
  - Sexual Behavior Treatment 39 (Minimum of 1 unit)
- 18 and Over
  - Higher Risk Core Program 114 + 53 PVs (5 units – 3 Core, 2 PV)
  - Higher Risk Substance Dependence 108 + 73 PVs (6 units – 4 Sub., 2 PV)
  - Intensive Mental Health Needs 142 + 29 PVs (5 units)
  - Sexual Behavior Treatment 141 + 9 PVs (Minimum of 4 units)

***Total Single Room Units Needed: 29***

***Total Single Room Units Available in Northern California: 18***

Male Offenders Needing Lower Risk/Lower Need (Open Dorm) Units

- Under 18
  - Lower Risk Core Program 53 (2 units)
  - Lower Risk Substance Dependence 42 (2 units)
- 18 and Over
  - Lower Risk Core Program 200 + 49 PVs (8 units – 6 Core, 2 PV)
  - Lower Risk Substance Dependence 135 + 76 PVs (6 units – 4 Sub., 2 PV)

***Total Open Dorm Units Needed: 18***

***Total Open Dorm Units Available in Northern California: 23***

Southern California

Male Offenders Needing Higher Risk/Higher Need (Single Room) Units:

- Under 18
  - Higher Risk Core Program 78 (3 units)
  - Higher Risk Substance Dependence 100 (3 units)
  - Intensive Mental Health Needs 65 (2 units)
  - Sexual Behavior Treatment 10 (1 unit)
- 18 and Over
  - Higher Risk Core Program 131 + 42 PVs (5-6 units, 4 Core, 1-2 PV)
  - Higher Risk Substance Dependence 179 + 41 PVs (6-7 units, 5 Sub., 1-2 PV)
  - Intensive Mental Health Needs 142 + 38 PVs (5 units)
  - Sexual Behavior Treatment 75 + 8 PVs (3-4 units)

***Total Single Room Units Needed: 28-30***

***Total Single Room Units Available in Southern California: 48 (including 4 at El Paso)***

Male Offenders Needing Lower Risk/Lower Need (Open Dorm) Units

- Under 18
  - Lower Risk Core Program 36 (1 unit)
  - Lower Risk Substance Dependence 56 (2 units)
- 18 and Over
  - Lower Risk Core Program 113 + 36 PVs (4 units, 3 Core, 1 PV))
  - Lower Risk Substance Dependence 179 + 41 PVs (6-7 units, 5 Sub., 1-2 PV)

***Total Open Dorm Units Needed: 13-14***

***Total Open Dorm Units Available in Southern California: 9 (0 without 9 at El Paso)***

Note: The analysis below does not include the 5-8 units needed for Intake or the 5 units currently used for female offenders. (There are only 98 units available statewide, many of which are currently closed.)

#### Preliminary Conclusions Based on Initial Assessment:

- A complete and immediate “sort” based on the interim classification tool would result in significant numbers of higher risk offenders being sent to Southern California and all lower risk offenders sent to Northern California.
- Every available living unit would have to be opened and fully staffed immediately. This is not feasible given the timeframes needed for budget authority, recruitment, hiring, and training.

Therefore, DJJ has developed the phased-in implementation strategy as described in the rest of the plan.

#### A Phased-In Approach

DJJ cannot wait for new facility construction, or even renovation, to begin addressing the deficiencies outlined in the *Farrell* lawsuit. Therefore, in the near future, DJJ is limited to its existing facilities and must identify a strategy for placing youthful offenders as safely and effectively as possible, given existing facility constraints. As described in earlier sections, DJJ will phase in implementation in 20 living units at a time. Phase I units will include a variety of single room and open dorm units, for under 18 and 18 year old and over populations, at facilities across the state. DJJ has chosen this option instead of “piloting” the new model at one or two facilities because DJJ recognizes its responsibility to begin implementing changes statewide.

#### Phase I Implementation

DJJ will target 20 living units for Phase I implementation of the Safety and Welfare Plan, representing approximately 25% of DJJ’s total units. These units will be the first to receive the enhanced staffing necessary to meet the requirements laid out in this plan. They will also be among the first to receive the additional training and other resources identified. (Note: DJJ does not plan to restrict training to staff in Phase I units, only to prioritize training to begin on these units first.) Many of the Phase I units will be established on living units that are currently closed, thereby reducing the population size of other units at that facility. DJJ has selected living units across the state, including both open-dorm, single room, and 18 year old and over and under 18 year old units for Phase I, enabling us to model the changes in a variety of settings.

#### Phase II Implementation

DJJ will target an additional 20 living units in Fiscal Year 07/08 for Phase II. Again, where possible, Phase II will be established on units that are currently closed, further reducing population size on surrounding units.

Phase II units will incorporate components of some of the longer-term goals of the plan. For example, Phase II units will include specific Re-entry Units, designed as step-down units within a facility to better prepare youthful offenders prior to their return to their communities. Phase II units will include additional elements of the Core Rehabilitation/Treatment Program as

developed by expert consultants during Phase I. Phase II will also include units for parole violators, addressing the specific rehabilitation/treatment needs of this shorter-term population.

#### Long Term:

Long-term implementation includes Phase III (FY 08/09) and Phase IV (FY 09/10) of living unit inclusion. By the end of Phase IV, all living units in existing facilities will be established/converted to the new model.

Depending on legislative authority and funding, new juvenile facilities may become operational during Phases III and IV. As these facilities/living units become available, DJJ will implement the new model in these facilities, making it possible to further reduce living unit size and begin to close existing facilities.

#### Facilities Master Plan

As illustrated above, in the long-term, the State must renovate existing or build new facilities in order to make safe and effective programming possible. For example, as the population analysis above illustrates, there are not enough higher risk units in Northern California or lower risk units in Southern California to place youthful offenders according to age, risk, need, and region. Nor are the higher risk units in any of the facilities appropriate for the types of programs outlined in this plan.

On December 1, 2005 DJJ will submit a preliminary Facilities Master Plan to the Legislature outlining the need for new facilities, based on the incompatibility of existing facilities with the program model outlined in this and the other *Farrell* remedial plans. In subsequent reports to the Legislature over the next six months, DJJ will present more detailed plans for new construction, renovation, and the continued use of existing facilities. The preliminary Facilities Master Plan proposes a preliminary outline for achieving long-term facilities solutions that will match the needs of youthful offenders coming to DJJ from throughout the state in the coming decades. These facilities must meet the array of security, programmatic and treatment needs of the approximately 2,255 youth projected to be in the custody of DJJ in 2015.

The DJJ facilities master planning process is incorporating the specific classification elements described in the Assessment section of this remedial plan in developing a system-wide approach to providing appropriate facilities in the long-term. The resulting individual facilities will be planned and designed to meet the targeted risk and program needs of the populations they will house.

Subsequent Master Plan updates to the Legislature in March 2006 and June 2006 will provide increased details about system-wide planning as well as proposed continued use for existing facilities. DJJ is very conscious of the need for Legislative support and authority to move forward with facility design and construction. Therefore, while DJJ believes that new facilities are critical to the state's ability to improve our juvenile corrections system, the department cannot get too far ahead of the deliberative process with respect to facility construction and has avoided making specific commitments for new facility construction as part of the *Farrell* remedial plans.

The preliminary Facilities Master Plan will outline the need for an array of facilities and living units, including:

- Higher risk units for those youth who are assessed as needing placement in a high risk unit;
- Moderate risk units, either as a step-down from a high risk unit or as an initial placement;
- Lower risk units, primarily used as “step-down” from the higher risk units;
- Living units specifically designed to prepare youth to re-enter society;
- Behavior Treatment Programs designed for safe and secure programming of offenders who require specialized behavior treatment programs;
- Adequate and appropriate rehabilitation/treatment, educational and vocational space, depending on the size and mission of the facility;
- Adequate and appropriate space for medical and mental health care; and
- A Reception Centers in northern and southern California.

At the end of the December 1, 2005 preliminary Facilities Master Plan submittal to the Legislature, DJJ outlines a schedule for the design and construction of a new prototype Core Treatment Facility, contingent upon necessary funding and authorization. The first new prototype facility could be occupied in the Spring of 2009. More detailed information regarding proposals to renovate or build additional prototype facilities, coupled with a plan to evaluate the closure of any existing facilities, will be submitted in status reports to the Legislature in March and June 2006. This planning process will be informed by updated population projections. Assuming the population continues to decline to 2,255 by 2015, as currently projected, DJJ will be able to accelerate a schedule to close existing facilities.

Nonetheless, even in the short-term, specific facility modifications may be necessary for safety and/or programmatic reasons.

Immediate:

- Develop a preliminary Facilities Master Plan, outlining a long-term plan for the array of facilities needed. Incorporate into this plan, a preliminary assessment of existing facilities, including safety and programmatic requirements.
- Identify necessary modifications to existing facilities to ensure safe programming in the interim.

Phase I & II:

- Make modifications, as necessary, to existing facilities to implement the changes outlined in the initial phases of this plan.

Long-Term:

- Develop new facilities and conduct major renovations on existing facilities, as necessary and appropriate to implement effective programming for youthful offenders to reduce violence in the institutions and to successfully prepare them to re-enter society.

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